



HLTTV FITNESS GRANT APPLICATION

PERSONAL DETAILS

The Heart and Lung Transplant Trust (Victoria) Inc. ("the Trust") offers a Fitness Grant to its members, that qualify, to assist with expenditure for fitness activities. The Trust will reimburse 50% of receipted costs up to a \$150 maximum. As funds are limited, the Trust may not be able to assist all members who apply each year.

The idea is to help post-transplant members to maintain fitness and wellbeing by partially reimbursing them for fitness and/or wellbeing expenditure up to \$150 per member in any year. This fulfills two of the Trust's objectives:

1. Provide peer support and encouragement for all pre and post heart and lung transplant patients, their families and/or their carers; and
2. Provide relevant information and encourage healthy lifestyle choices to ensure the maintenance of optimal physical health.

The expenditure must be for an appropriate fitness-type cost (eg gym membership; physiotherapy session; spin, swimming, yoga, pilates or tai chi classes; administration cost to a swimming pool or a gym; exercise bike; wii; treadmill, step machine, cross trainer; sporting footwear.

Please note funds are limited, so applications may not be approved, even if all of the above conditions are satisfied.

If you have any questions, please visit our website www.hlppv.org.au or email the Secretary at secretary@hlppv.org.au or write to the Secretary at the address below.

CONDITIONS

Members must satisfy the following conditions:

1. Be a current member of the Heart and Lung Transplant Trust (Victoria) Inc;
2. have no subscription arrears;
3. have not received a previous grant in the last year;
4. have paid the current year subscription by 30 September or was a pre-transplant member at 1 July in current year.

APPLICATION OPTIONS: Signed application forms, with receipts, should be submitted to

Email

secretary@hlppv.org.au

Last update 12/8/19

Post

The Secretary
Heart and Lung Transplant Trust (Victoria) Inc
PO Box 25036, Melbourne VIC 3004

PAYMENT OPTIONS: Payment can be made through either

Electronic Funds Transfer (EFT) or Cheque



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Title	First name	Last name
Address		
Suburb	State	Postcode
Date of transplant	Type of transplant	
Have you had a previous grant?	YES NO	Date of last grant (if applicable)?
Date last HLTTV membership subscription paid?		

PAYMENT OPTIONS: I would like my payment made by *(indicate preferred method)*

Electronic Funds Transfer	Cheque
Name of bank	Cheque payable to
Account name	
BSB Acc No.	

DECLARATION

I, the undersigned, confirm that:

1. I am a current member of the Heart and Lung Transplant Trust (Victoria) Inc or I am a carer of such a member; and
2. these purchases were made strictly for the member's sole benefit and for the member's fitness purposes only; and
3. I have attached itemised receipts; and
4. the information I have supplied is true and correct.

Signed	Date
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APPLICATION OPTIONS: Please return pages 2 and 3 of this form signed, with receipts, to

Email secretary@hlttv.org.au	Post The Secretary Heart and Lung Transplant Trust (Victoria) Inc PO Box 25036, Melbourne VIC 3004
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This form allows you to write your responses directly onto the page. Once you are finished, simply save the pdf and then email it back to the email address below: secretary@hlttv.org.au

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Date	Description of item	Purchased from	Cost
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL			\$
50% REIMBURSEMENT (MAX \$150) (Office use only)			\$