

Cary Massa Memorial Scholarship Fund 2018 PA Breast Cancer Coalition Conference

I would like to apply for: **Registration Scholarship**
(waived \$25 registration fee) **Travel Grant**
(waived \$25 registration fee, includes one standard guest room for night of October 18, 2018 and reimbursement for documented travel expenses up to \$100)

Name: _____

Address: _____

Phone Number: _____ Email: _____

Have you attended a previous PBCC Conference? _____ If yes, what year(s)? _____

Why is attending this conference important to you?

Do you plan to attend the PBCC Pink Party on Thursday, October 18, 2018? YES NO

Applicants must:

- Be unable to attend the conference without this scholarship.
- Live or work in Pennsylvania.
- Live at least 50 miles from the Harrisburg Hilton if applying for a travel grant.
- Make their own travel and hotel arrangements. Use code **COAL18** for discounted room rate. Reservations must be made before September 20, 2018.

By signing below, I confirm the following:

- I live 50 miles or more from the Harrisburg Hilton. (Applying for **Travel Grant** only)
- Without this grant, I could not attend the PA Breast Cancer Coalition Conference.
- The PBCC may use my comments in promotional materials and/or on its website.

Signature _____

Date _____

Complete and return by **September 7, 2018** to:

PA Breast Cancer Coalition
2397 Quentin Road, Suite B
Lebanon, PA 17078

Fax: 717-769-2131
Email: stacy@pabreastcancer.org

