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THE VOICE OF BRAIN INJURY

2018 ANNUAL CONFERENCE Scholarship Application – September 13 & 14, 2018

The Brain Injury Association of Michigan is committed to providing educational opportunities to persons with brain injury and family members. **Because fees are already dramatically reduced, scholarships are only applied for one day of sessions. If you choose to attend sessions both days, we require you to pay the survivor/family rate. You must be a BIAMI member to qualify for a scholarship.**

We are very grateful to our sponsors who make it possible to provide the scholarships and free transportation. We are confident that our members will demonstrate honesty and integrity when applying for scholarship funds. **Please keep this in mind when applying for scholarship funding so we are able to provide these services to as many members as possible.**

We do have several activities at no cost planned for Thursday. Please note: You will be responsible for your own lunch.

- 1:45 New this Year: “Voting Rights, Access & Responsibilities for People with Disabilities”**
- 2:45 Meeting of Members - Join BIAMI President & CEO to learn what is new at the BIAMI**
- 3:45 Visit the Conference Exhibit Hall**
- 5:30 Pre-Dinner Reception & Resource Fair –Get your passport stamped and receive a BIAMI t-shirt!**
- 6:30 Dinner Dance** (scholarship cost is \$18) Please note: The entertainment may get louder as the night progresses; if you have noise sensitivity, you might want to consider bringing earbuds.

I am requesting a scholarship for the following:

- Thursday Evening Dinner Dance
- Circle Only One Day:* Thursday or Friday Workshops (includes lunch)
- Single Hotel Room
- Double Hotel Room (*double rooms available for those sharing, see name below*)

I will share with _____

Total amount due:

- I will make arrangements with **Michigan Transportation (877 – 777-7900)**

Cost with no scholarship	Cost With Scholarship
\$ 35	\$ 18
\$ 70	\$ 30
\$ 129	\$ 63
\$ 129	\$ 63
*Accessible Room Needed?	
(one king bed only)	\$

Scholarships are limited to BIAMI members . . . Register by August 24!

Our Mission: To improve the lives of those affected by brain injury in Michigan and to reduce the incidence and impact of brain injury through advocacy, awareness, education, prevention, research and support.



Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Chapter/Support Group _____

Emergency Contact Name & Phone # _____

Check appropriate box: Person with a brain injury Family member

Total amount due (from previous page) _____

If you are financially unable to pay the above fees, please call our office at (800) 444-6443.

<i>Office Use Only</i>
Expiration date _____

Room Accommodations: (Fill out only if you are requesting a hotel room)

*Wheelchair Accessible Room

*Accessible Rooms Available with One King Bed Only

Payment:

Check: Please make checks payable to: **Brain Injury Association of Michigan**

Charge:

Visa MasterCard American Express Discover

Charge Card No. _____ Expiration _____

Name on CC _____ CID# _____

Billing Address for Credit Card _____

IMPORTANT NOTES:

- Completion of this form does not guarantee approval.
- Scholarships cover the registration fee for EITHER Thursday OR Friday workshops and lunch.
- **Transportation to and from the conference is the responsibility of the individual attending.**
- The Brain Injury Association of Michigan will make all hotel reservations for those who are requesting a room – **after** the scholarship is approved.
- **Please note that this conference is attended by over 1200 people and can be overwhelming. If you need personal assistance, please bring a friend or family member along (at same cost). As much as we would like to, we can't provide you with assistance.**

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