

I.G.R.A. EDUCATIONAL FUND GUIDELINES

Any I.G.R.A. Member/Recognized Association may apply for funds from the I.G.R.A. Education Fund by completing and returning the I.G.R.A. REQUEST FOR EDUCATION FUNDS APPLICATION. A proposed budget must accompany the Application.

APPLICATIONS MUST BE **RECEIVED** BY THE I.G.R.A. SECRETARY BY FEBRUARY 1st OF EACH YEAR. Applications must be complete, signed and include all supporting documentation by this deadline.

The I.G.R.A Executive Board, in conjunction with the Contestant Liaison Committee Chair(s), will review all requests at the first Board meeting following February 1st. Within (10) days following that meeting, all applicants will be notified of receipt and status of the request for educational money. Within ten (10) days following each event, the host Association must submit a revenue and expense statement showing actual income and expenditures, as well as a list of participants to the I.G.R.A. Secretary.

The I.G.R.A Executive Board, in conjunction with the Contestant Liaison Committee Chair(s), will review all event completion documentation at the final Board meeting of the year. The monies available will be disbursed equally between all Associations that have successfully applied for and proven completion of an educational or rodeo school event. Monies will be distributed within ten (10) days of the final I.G.R.A. Board meeting of the year, and are not to exceed the amount of expenses incurred by each Association.

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I.G.R.A. REQUEST FOR EDUCATION FUNDS APPLICATION

I.G.R.A. MEMBER/RECOGNIZED ASSOCIATION: NAME: ____ ADDRESS: PHONE NUMBER: E-MAIL: **ASSOCIATION CONTACT INFORMATION:** NAME: ADDRESS: PHONE NUMBER: E-MAIL: **EVENT DETAILS** TYPE OF EDUCATIONAL EVENT (check all that apply): Rodeo School - Horse Safety Seminar/Training Rodeo School – Rough Stock **New Contestant** Rodeo School – Other (describe below) Chutes and/or Arena Crew **Royalty Seminar Country Dance** Other (describe below) INSTRUCTOR(S) AND QUALIFICATIONS: LOCATION OF EVENT:

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DATE(S) OF EVENT:

HAS ASSOCIATION PRO	DUCED THIS TYPE OF EV	ENT BEFORE?	
YES		NO	
WILL PARTICPANTS PA	Y ANY FEES/REGISTRATI	ON?	
YES If so, How Mu	uch? \$	NO	
WILL I.G.R.A. INSURANC	CE RIDERS BE REQUIRED	FOR VENUE, S	SPONSOF
OR ANY ADDITIONAL IN	SURED?		
YES (If so, contact the I.G.R	R.A. Administrative Assistant for assistance	NO	
DOES THE EVENT HAVE	NON-I.G.R.A. SPONSORS	HIP?	
YES (If so, clearly indicate i	n Budget and include list of Sponsors)	NO	
WHAT ASSISTANCE CAN	NICDA DDOVIDE?		
VIEWS AND APPROVALS	<u>S</u>		
	-		
MEMBER/RECOGNIZED	ASSOCIATION		
MEMBER/RECOGNIZED Submitted By (Print Name)	ASSOCIATION		Date
MEMBER/RECOGNIZED Submitted By (Print Name) I.G.R.A.	ASSOCIATION Authorized Signature		
MEMBER/RECOGNIZED Submitted By (Print Name) I.G.R.A. Date Received:	ASSOCIATION Authorized Signature By: (Secretary)		
MEMBER/RECOGNIZED Submitted By (Print Name) I.G.R.A. Date Received: Date Reviewed by I.G.R.A:	ASSOCIATION Authorized Signature By: (Secretary) Acce	pted: Yes	No
MEMBER/RECOGNIZED Submitted By (Print Name) I.G.R.A. Date Received: Date Reviewed by I.G.R.A:	ASSOCIATION Authorized Signature By: (Secretary)	pted: Yes	No
I.G.R.A. Date Received: Date Reviewed by I.G.R.A: Comments:	ASSOCIATION Authorized Signature By: (Secretary) Acce	pted: Yes	No

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