

2015 Young Adult Scholarship Application

Scholarship registrations includes:

- 1-Entire registration fee for Friday, Nov. 13, Saturday, Nov. 14, and Sunday, Nov. 15
- 2-Reservation for a **shared** hotel room for the nights of Friday, Nov. 13and Saturday, Nov. 14 (NAMI-NYS will make your hotel reservations.)

Name:	Age:	Sex: Male Femal
NAMI-NYS Affiliate (if any):	College (if any)	
Address:		
City, State, Zip:		
Cell Phone #:		
Email:		
Are you a person living with a mental illne	ss or a family memb	er? (please circle one)
Would you be interested in starting a NAM	II on Campus?	
Have you participated in a NAMI Signatui	re Program? If so, p	lease list:
Additional information you would like to s	hare with NAMI-NY	YS:

Registration must be received by Friday, October 16th. Please mail application to:

NAMI-NYS Attn: Tammie Paradis 99 Pine St., Albany, NY 12207 Or fax to 518-462-3811 Or call 518-462-2000 if you have any questions, ask for Matthew

Recipients will be notified by Friday, October 23rd