**AOMT MEMBERSHIP SUPPORT FUND**

PURPOSE:

In an effort to support our members and the national organization in a way that is congruent with the mission of AOMT, we will make available financial awards to **two** professional music therapists who are experiencing financial difficulty or are seeking to reinstate discontinued membership. This program is modeled after the Great Lakes Region Membership Support Fund.

PROCEDURE:

***Recipients of the professional award must be members of AOMT and meet one or more of the following criteria:***

 **1. Lost a job or had a significant change in family income**

 **2. Experienced a significant reduction in hours**

 **3. Had to relocate to find a job or had to change jobs**

 **4. Struggling to secure full-time employment since finishing an internship more than**

 **9 months ago.**

Candidates are required to complete the attached application explaining their reasons for needing assistance. Applications will be reviewed by the Executive Committee and applicants will be notified within 6 weeks of the decision.

Current AMTA professional dues are $235.00. AOMT will pay $185.00 of an individual membership, and the recipient will pay the remaining $50.00. A person will be eligible to receive this award only once.

If approved, the applicant will be notified and instructed to complete an AMTA membership form, fill out a check made out to AMTA ($50.00) and return both to the AOMT treasurer within two weeks of notification. The AOMT treasurer will forward both of these items and a check for the remaining amount to AMTA.

**APPLICATION FOR AOMT MEMBERSHIP SUPPORT FUND AWARD**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In 150-200 words, provide reasons for needing assistance to pay AMTA membership dues.**

Return completed application to: Debbie Bates, MA, MT-BC, 4254 Bridgewater Pkwy. #203

 Stow, OH 44224 or email to pastpresident@aomt.org.