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UNITED KINGDOM THALASSAEMIA SOCIETY

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• Email: office@ukts.org • www.ukts.org

The UKTS Management Committee may decide to grant subsidies from time to time to certain persons to assist with the expenses of travel and subsistence. **Any and all such subsidies are granted entirely at the discretion of the UKTS Management Committee and their decision will be final in any dispute.**

Conference subsidies

In the event that the UKTS Management Committee decides to grant subsidies to assist with the expenses of travel and subsistence to the bi-annual Thalassaemia International Federation Conference for Thalassaemia Patients and Parents (or any other conferences or events), the following rules shall apply.

1. Only persons (of any age) who meet the following criteria will be eligible to apply for any subsidy –
 - Thalassaemia patients who are either annual or life members of the UK Thalassaemia Society. In the case of both annual and life members, the relevant subscription must have been paid before the date of application. Thalassaemia patients are defined as: persons who have diagnosed with one of the following - beta thalassaemia major, beta thalassaemia intermedia, HbE/beta thalassaemia, HbH disease, alpha thalassaemia major.
 - Any applicant must be permanently resident in the UK and must be entitled to and receiving free treatment under the UK National Health Service.
2. Former annual members (i.e. those whose membership fees have not been paid for the current year on the date of application) will not be eligible to apply.
3. The amount of any subsidy to be decided by the UKTS Management Committee.
4. Any subsidy will be announced on the UKTS website and may be communicated by other means such as email. Applications will be invited at that time. Forms for the purpose of application will be available from the UKTS office.
5. Applications must be received by the UKTS office no later than 4 weeks prior to the commencement date of the conference.
6. Each applicant will be required to make a full declaration of whether any of their conference expenses (travel, accommodation, registration and subsistence) will be met by any other party or parties. Where expenses are being met by a third party or parties, the name(s) of the contributor(s) and the amount(s) must be disclosed. In such circumstances the UKTS Management Committee may decide any of the following: a) the full subsidy will be granted OR b) a reduced subsidy will be granted OR c) no subsidy will be granted.
7. Each applicant will receive written confirmation of whether or not a subsidy has been granted to them. The UKTS Management Committee reserves the right to make any enquiries necessary to satisfy themselves that the applicant meets the relevant criteria. The decision of the UKTS Management Committee will be final in any dispute.
8. Each applicant must furnish proof to the satisfaction of the UKTS Management Committee that s/he attended the conference. Applicants may be asked to write a short report on the conference and what benefits they gained from attending.
9. Any subsidy granted will be paid in the UK after the conference has finished.

Application forms must be returned to the UKTS office; by post to the address shown above or by email to office@ukts.org



APPLICATION FOR UK THALASSAEMIA SOCIETY SUBSIDY/GRANT TO ASSIST WITH THE EXPENSES OF ATTENDING A CONFERENCE / EVENT

Only those who are BOTH thalassaemia patients (diagnosed with; beta thalassaemia major, beta thalassaemia intermedia, HbE/beta thalassaemia, HbH disease or alpha thalassaemia major) and UKTS members (life or annual) will be eligible to apply.

NAME.....

ADDRESS.....

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EMAIL.....

TELEPHONE CONTACT NUMBER.....

MALE / FEMALE (PLEASE CIRCLE) DATE OF BIRTH.....

WHO IS YOUR THALASSAEMIA DOCTOR.....

WHICH HOSPITAL DO YOU ATTEND.....

THIS IS AN APPLICATION FOR A GRANT TO ASSIST WITH THE EXPENSES OF ATTENDING A CONFERENCE OR EVENT. PLEASE SUPPLY THE NAME AND DATE OF THE CONFERENCE/EVENT. APPLICATIONS MUST BE RECEIVED BY THE UKTS OFFICE AT LEAST 4 WEEKS BEFORE THE START OF THE CONFERENCE.

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HAVE YOU RECEIVED ANY ASSISTANCE OR SPONSORSHIP, FINANCIAL OR OTHERWISE, TO ASSIST WITH THE EXPENSES OF ATTENDING THIS CONFERENCE/EVENT? YES / NO (PLEASE CIRCLE)

IF "YES", PLEASE PROVIDE FULL DETAILS, INCLUDING AMOUNT AND SOURCE.....

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I DECLARE THAT ALL THE INFORMATION SUPPLIED ABOVE IS CORRECT. I AGREE TO PROVIDE PROOF OF ATTENDANCE (E.G. COPY OF REGISTRATION) AND A BRIEF REPORT ON THE EVENT IF REQUIRED.

SIGNED.....DATE.....

UKTS office use only

UKTS membership annual / life Fee paid on: Receipt no.

UKTS membership no.