## Application for sponsorship to Bi-Annual CGNA conference

| Conference city:   | Year: |
|--|-------|
| Name:Address:Email:Phone:  |       |
| Please describe why you should be selected as a recipient for sponsorship: |       |

\_\_\_ Yes I have been a member for 2 years or more.

Sponsorship will be considered for those members who have been active in the MGNA for 2 years or more. Reimbursement will occur after receipts and proof of attendance have been shown.





