



Charitable Funding Information

Eligibility Requirements for Individual Grants:

- Applicants must suffer from a **spinal cord injury or spinal cord related disorder**.
- Applicants must demonstrate financial need and may be required to provide documentation.
- There is no age requirement.
- Applicants must be a resident in the United States.
- Applicants must request specific modifications or equipment to apply for a Bryon Riesch Paralysis Foundation grant; requests for "anything you can give" will not be considered.
- Partial Payments toward larger items (i.e. vans) will not be considered unless all payments are already in place for the total amount. For example, if requesting \$7,000 toward a \$30,000 van, you must have already obtained \$23,000 to complete the transaction.
- Examples of eligible items include upgrade and maintenance of wheelchairs, vehicle modifications (i.e., hand controls or lifts), small home modifications including ramp and lift installation, computers, and other adaptive equipment. Applications and estimates for wheelchairs must be from a vendor local to the applicant. We cannot accept internet quotes.
- If possible, be willing to provide a picture of the completed grant request.
- Grants are disbursed directly to suppliers of the desired equipment or modifications. Individuals making the grant application are required to submit estimates from potential suppliers.

Please complete all sections of the application; incomplete applications will not be considered.

How to Apply For an Individual Grant:

Applicants must complete all questions of the applications in order to be considered for a BRPF Individual Grant, including providing contact information and estimates from at least two (2) suppliers and/or contractors for the equipment or renovations requested in the application; incomplete applications will not be considered.

NO PHONE CALLS PLEASE. Due to the volume of grant applications, we respectfully request no phone calls inquiring about the status of applications. Grant recipients will be notified by phone, email or mail upon approval.

Application Submission Periods and Requirements

In addition to the application, written quotes from companies/contractors for modifications must be included. Applications that do not have all documents included will not be reviewed. All materials submitted are non--returnable.

Applications are accepted year-round and are considered at quarterly board meetings. Notifications of awards will be mailed out after the Board has met. Grants typically range from \$2,000 to \$7,500; there is no minimum award. Grants are awarded quarterly.

Because of the high number of grant requests you will only be notified if you receive a grant.

All supporting materials should be submitted to info@brpf.org or mailed to:
Bryon Riesch Paralysis Foundation
N14 W23900 Stone Ridge Dr
Waukesha, WI 53188

Charitable Funding Application

Name

Date

Address

City

State

Zip

Phone

Fax

Email

Birthdate

Nature of
Disability

If SCI, what
level

Date of injury

Amount of
Request

Total
amount
required

How did you hear about Bryon Riesch Paralysis Foundation?

Describe the nature and degree of your neurological disorder, and how it affects your everyday life.

Provide a detailed description of the equipment of modification(s) for which you are applying, including manufacturer's name, model numbers, etc. if applicable.

Describe your sources of financial support. (Note: you may be asked to provide supporting documentation.)

Describe other factors that you wish to be taken into consideration (health factors, living arrangements, financial or family issues, etc.)

Provide a brief explanation of how the equipment or modification(s) for which you are applying would impact your daily life.

List other organizations from whom you have requested funds.

Have other funds been secured?	Yes	If yes, how much?
	No	

Additional comments

In order to be considered for a charitable grant, applicants must provide estimates for the cost of the equipment or renovations requested. Please provide the names, addresses and phone numbers of **at least two (2) companies and/or contractors** and their written estimates for the equipment or modification(s) requested. Please attach the written quotes.

Company 1

Contact name

City

State

Zip

Phone

Website

Price quoted

Company 2

Contact name

City

State

Zip

Phone

Website

Price quoted

Company 3

Contact name

City

State

Zip

Phone

Website

Price quoted