



# The Journey Fund

4386 King Valley Dr.  
Smyrna, GA 30082  
770 438-0533

[www.TheJourneyFund.com](http://www.TheJourneyFund.com)

## Application for Assistance

**PLEASE FILL APPLICATION OUT COMPLETELY**

**Name:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Email:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Belt Color** \_\_\_\_\_ **Gender: M or F**

**Martial Arts School** \_\_\_\_\_

**Instructor** \_\_\_\_\_

**AAU# if member** \_\_\_\_\_

**Financial Info: please attach proof of income and written statement covering the reason you feel deserving of this assistance.**

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Guardian or Parent:** \_\_\_\_\_