



Arthrogryposis Multiplex Congenita Support, Inc.

BEREAVEMENT FUND APPLICATION

AMCSI will provide one grant of \$500 for funeral expenses to the surviving spouse, parent/guardian or children of an individual with a confirmed medical diagnosis of arthrogryposis multiplex congenita.

These funds may be used to assist the family with any funeral expenses.

AMCSI's Bereavement Fund is open to all members and nonmembers of AMCSI.

There is no age limit for the AMCer.

Funds must be dispersed to immediate family members only. Immediate family members are defined as spouse, parent/guardian or children.

The Bereavement Fund is open to all U.S. residents.

This application must be signed and returned with supporting documentation of the individual's diagnosis and death.

Name _____

Signature _____ Date _____

Address _____
City State Zip

Phone _____ Email _____

AMCer's name _____ Date of birth/death _____

AMCSI would like to extend our sincerest condolences and love to your family.

We would also like to offer to put your AMCer's memorial picture (made by you or a member of the Board) on our AMC Angel memorial page located at amcsupport.org/amc-memorial.

Please send picture to bod@amcsupport.org.

Reaching Out. Providing Hope. Showing the World.