

Hearing Loss Association of America Rochester Chapter, Inc.

Partial Reimbursement of HLAA Convention Expenditures

Maximum reimbursement allowed for Chapter Members will be \$1,000

Maximum reimbursement allowed for the President will be \$2,000

When authorized by the HLAA Rochester Board of Directors, HLAA Rochester NY Chapter provides opportunities for reimbursement to members who actively contribute to the Chapter by their diligent commitment of time, effort and skills. This policy does not require the Board to fund the convention reimbursement program every year.

Reimbursement helps defray the cost of attending the National Convention and is provided as a means of recognition for those who give of themselves on an ongoing basis. Reimbursed amounts are distributed following the Convention.

All applicants must submit Part I of the Application for Reimbursement as directed, to determine if the member is *an active and contributing member* of our Chapter. Part II addresses the expectations required to participate in Convention activities. Upon return from the Convention, complete Part II, Section 3: "While attending the Convention" and Section 4 "Convention Information and Costs Incurred" (receipts required). Submit via email to: *cloftus3@gmail.com* or *US Mail*. The applicant will be requested to give a brief report at the September program meeting highlighting the Convention activities the applicant attended. Or, the applicant may submit a 100 – 200-word article about their experience at the Convention for the HLAA Rochester Chapter Newsletter.

PART I

What is an "Active and Contributing Member" ?

HLAA Rochester's goal is to provide support for those who show a commitment to the mission/work of the Rochester Chapter on an ongoing basis. A combination of factors will be used to determine an "Active and Contributing Member" to the HLAA Rochester Chapter. The Application Form requires that applicants describe their ongoing work and/or accomplishments and commitment for the chapter. While the criteria below are helpful, not all must be met, and other contributions may be included.

Examples of an 'Active and Contributing Member' of the HLAA Rochester Chapter are below:

- Having attended 5 or more Chapter meetings in the past year, either in person or via Zoom
- Serving on the Chapter Board of Directors
- Belonging and contributing to at least one Chapter Committee: regularly attending committee meetings, corresponding with other members, and substantially contributing to the work of the committee
- Helping plan and/or volunteering at two or more Chapter events such as: the Chapter Annual Dinner and/or Picnic, Demonstration ('Demo') Center, Health Fair Volunteer, Chapter meeting Presenter, etc. in the 12 months prior to your application

Applicants must be a current Member of HLAA Rochester Chapter at the time of application submission. Two of the above qualifiers must be met.

Reimbursements will be made following the Convention. *

Complete and return the following application to the individual indicated on Page 5.

**Amounts and items to be reimbursed are at the discretion of the Chapter.*

Hearing Loss Association of America Rochester Chapter, Inc.

Application for Partial Reimbursement of HLAA Convention Expenditures

Directions for completion of this application and submission of receipts:

- **ATLEAST30DAYSPRIOR** to convention, complete Sections #1-2 of this form, and submit to the Reimbursement Committee/ C.Loftus (see page 5).
- **WITHIN 60 DAYS FOLLOWING the Convention:** complete **Sections #3-5** and submit to the Reimbursement Committee/ C Loftus. (see page 5)

Location and Year of the Convention

Reimbursement applications and supporting receipts must be submitted to the Reimbursement Committee by the specified deadline . Submissions will be considered on a rolling basis.

Section 1: Applicant’s Contact Information

Name: _____
(Last) (First) (Middle)

Address: _____
(House Number and Street) (City) (zip code)

Phone Number _____
(Area Code) (Number) (Cell Phone)

Email Address: _____

Are you a Rochester HLAA Member? Yes _____ How Long? _____ No _____

Section 2: Applicant’s Contributions to HLAA Rochester

Use the space below or a separate sheet, please describe in 100 -- 200 words your activities in support of the work of HLAA Rochester. Include applicant’s name and address. You may use the policy criteria examples as a guideline.

Please return the completed Application to the individual shown on page 5.

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Part II

Section 3: While attending the Convention:

Attendance at the Convention for a minimum of three days/three nights is expected for all applicants. **Please check the following events you attended. We encourage you to attend the three highlighted events.**

Leadership Training

Product Demonstration

National Board of Directors Session

Exhibit Hall

General Session/Keynote Speaker

Welcome Back event

Research Symposium

Please attend a minimum of two workshops each day and write a sentence or two about each one.

Check here if you attended Wednesday June 10 Leadership training etc

Thursday, June 11

Educational
Workshop #1

Educational
Workshop #2

Friday, June 12

Educational
Workshop #1

Educational
Workshop #2

Please complete the above information and return to the individual as indicated on page 5.

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Section 4: Convention Information and Costs Incurred

**HLAA Rochester may reimburse those who qualify for Convention expenses for any combination of: hotel/ lodging, registration, convention-sponsored activities, transportation and parking. *Food, beverages, non-convention related events, trip extensions, etc. are not reimbursed*

LOCATION/YEAR OF CONVENTION: _____

DATES OF CONVENTION PROGRAM: _____

REGISTRATION: \$ _____

HLAA SPECIAL EVENTS: \$ _____

TRANSPORTATION (Air, Rail, Bus, Taxi/Uber/Lyft): \$ _____

PARKING: \$ _____

IF PERSONAL VEHICLE, Gasoline, Tolls Total-(submit receipts)

MILEAGE: # MILES _____

LODGING: _____

NUMBER OF NIGHTS: _____

Section 5 : Submission of Receipts for HLAA Convention Expenditures

- 1. Staple and number each receipt.** All completed applications will be submitted to the Reimbursement Committee.
- 2. On a separate sheet** (with your name and address) indicate corresponding number RE the nature of the expense for each receipt (eg. #1 receipt-hotel; #2 receipt-registration; etc.), and submit/mail to the Reimbursement Committee Chair (See Committee address/contact info on Page 5).

This page is for HLAA Rochester Reimbursement Committee use only.

Convention Registration

Lodging Costs

Air Transportation

Gasoline,tolls,Parking
receipts

HLAA Event - related activity costs

Total qualifying expenses:

Total amount

Reimbursed amount:

Date of Reimbursement by Chapter
treasurer Tom Corteville:

Check Number

Please return Application and all forms
to: Ms. Carol Loftus
6001 Redfield Drive
Farmington, NY 14425

email: cloftus3@gmail.com