



Application Form

Please complete in the English language.

Name _____
(This is your name exactly as it appears on your identification card for International payments)

Address _____

Address _____

City/Town _____ State/Province _____ Postal Code _____

Country _____ E-mail _____

Phone (Home) _____ (Cell) _____

Person Affected (Name & relationship to applicant) _____

Age of child (up to 18 years old) _____ Type of ichthyosis _____

Are you a member of FIRST? *(circle one)* Yes / No I'm not sure

How much money are you requesting? _____ *(Awards will not exceed \$300.00 US dollars)*

*For non-US recipients, funds will be available via a Western Union transfer. Information will be emailed to you to receive the grant award at a local Western Union branch near you.
It is very important that your name on this form match your identification card.*

Please list the product(s), treatment(s), and/or cooling device(s) for which you are applying?

Financial range of income per year per household in US dollars *(circle one)*:

- Less than \$25,000
- \$25,001 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- Greater than \$100,000

Please use the following section to supply any additional information relevant to this application (in English):

Please attach a photograph and a note from your doctor stating that you are affected with ichthyosis.

/we understand that application for grants from the Diya & Aliya's Friends (DAF) are awarded solely at the discretion of the Foundation for Ichthyosis & Related Skin Types, Inc.® (FIRST), and that all decisions by FIRST are final.

A special fund for children around the world affected with ichthyosis. This fund is intended to provide financial assistance to purchase lotions, medicine, and treatment necessities.



This fund is provided through the generosity of the Shahnaz Kraybill family (Aliya, affected with ichthyosis, her sister, Diya, and their parents Durreen and Robert). FIRST is happy to administer this fund which provides small grants to deserving families.

Please return form to:

Diya & Aliya's Friends (DAF) Fund

FIRST
PO Box 1067
Lansdale, PA 19446
USA
215-997-9400 or
800-545-3286
Fax: 215-997-9403

Signature(s) _____

Date _____