

**Gatlinburg Hospitality and Tourism Association
Community Fund Assistance Request Form**

This program was designed to show true hospitality to our member employees at a time of unforeseen challenge, so they may feel the comfort and care that they extend daily to others.

Parameters: The request must come as a result of hardship due to an unforeseen event. Funds extended will be used to assist with costs associated with this event.

Amounts: The maximum amount that can be requested is \$500. All amounts will be at the discretion of the GHTA Board of Directors and will be vetted through the Community Fund Committee.

Number of times same person can receive requested funds:

Each person receiving assistance may only do so one time in a 12-month period.

Disbursement is not guaranteed upon request.

**Gatlinburg Hospitality and Tourism Association
Community Fund Assistance Request Form**

GHTA Member Company making Request:

GHTA Member Company Representative Making Request:

GHTA Member Employee Needing Assistance:

Date Requested: _____ **Date Needed:** _____

Amount Requested: ___\$_____

Request Description:

Please submit to Gatlinburg Hospitality & Tourism Association Board of Directors.

Via email: Bob Fant – Rfant@parkvista.com

Fern Tricou – Tricou@Ripleys.com

Lindsey Johnson – Ljohnson@greystoneelodgetn.com

*Each person receiving assistance may only do so one time in a 12-month period.
Disbursement is not guaranteed upon request.*