

OUR MISSION:

Stick Horses and Capes is a nonprofit that helps provide financial assistance to families who have lost a child.

Stick Horses and Capes Application for Financial Assistance

Full name of child:	Age of child:
Date of birth of child:	Date of death of child:
Person applying for assistance:	Relation to child:
Mother's name:	Telephone:
Father's name:	Telephone:
Address:	
Email:	
Please share the family's story:	
Please state how the financial assistance is to be us	sed:
Funeral Home:	Telephone:
had legal custody of the child at the time of tProof of child's death (obituary or death certi	ficate). ing that all information is true. Should it be determined that any information is
Signature:	Date:
 Application Requirements: Only families that have lost a child birth to 17 Applications must be submitted within one y 	
 Stick Horses and Capes reserves the right to r Capes does not guarantee assistance and not at the discretion of the Board of Directors of S assistance without discrimination based on re 	or phone interview once the application is received. refuse any application for financial assistance for any reason. Stick Horses and t all requests will be fulfilled due to limitation of funds. Funding decisions are Stick Horses and Capes. Stick Horses and Capes grants applications for financial ace, color, sex, language, religion, or political opinion.
Please scan and email this application as well as pr mail to P.O. Box 4079, Abilene, Texas 79608	oof of guardianship and death certificate to stickhorsesandcapes@gmail.com or
Would your family be willing to share how Stick Ho I give permission to Stick Horses and Capes to shar	orses and Capes helped your family?yesno re a picture of my child:yesno

P.O. Box 4079 ■ Abilene, Texas 79608 stickhorsesandcapes@gmail.com ■ stickhorsesandcapes.org