Craig Cares emerged through the gift of friendship, in honor of Craig, to ease the transition in life for individuals following a spinal cord injury. Knowing the challenges Craig faced after his injury, Craig Cares aims to provide hope by helping others who are facing similar challenges in basic, yet impactful ways.

WHAT IS CRAIG CARES

Craig Cares is a grant program, funded by a charitable gift, intended to assist individuals with **NEW** spinal cord injuries as they adjust to life living with their injury. The goal is to provide this assistance, in a time of great need, when insurance will not cover or fully cover necessary items or services to maintain a positive quality of life. Individuals may apply for a grant, up to $1,000, if they meet the criteria as well as agree to the terms listed below. Applications will be reviewed and a determination will be made by a committee. If the application is approved, a check will be mailed to the address listed on the application. A receipt(s) or photograph of actual item(s) must be submitted to our organization to show proof of items purchased. Failure to submit a receipt will eliminate any future grant funding.

CRITERIA TO APPLY FOR GRANT

- Applicant must have a spinal cord injury & be a resident of Louisiana.
- Funds can only be used to cover costs that insurance will not cover.
- Injuries must be new (applications must be submitted within **six months** of injury).
- A line item description of ALL items requesting funding for and approximate amount of each item must be listed on application.
- If applicable, items must be for permanent use (not for temporary use).
- Funds must be used specifically for what they were requested for and a receipt (or photo of actual items) must be submitted showing what grant covered.
- Maximum distribution of funds will not exceed $1,000 nor is guaranteed.
- Applicant may only submit one application.
- You must be a member or sign up for free membership to our organization.

WHAT GRANT WILL COVER

FUNDS ARE INTENDED TO COVER BASIC NEEDS WHICH CAN INCLUDE:

Self Care Tools/Equipment: shower bench/chair, feeding and dressing devices, personal grooming devices, etc.
Transfer Equipment: transfer boards, slings, hoists, lifts, etc.
Mobility Devices: walkers, wheelchair parts/cushions, scooters, standing frame, etc.
Home Modification Supplies or Services: bathroom grab bars, wheelchair ramp, payment for home modification services, etc.
Environmental Control Devices: Alexa/Echo, remote control devices, installing control devices, etc.
Transportation Assistance: bus fares, ride service, etc.

When requesting funds to cover equipment, the equipment must be intended for **permanent** (not temporary) use.

FOR MORE INFORMATION:
https://www.biala.org/resource-center/biala-programs

3433 Hwy 190, Suite 270 Mandeville, LA 70471

504-982-0685 / kim@biala.org

APPLICATION

Full Name

Mailing Address
(where check should be sent)

City

Zip Code

Phone Number

E-Mail

Gender

Race

Marital Status

Date Of Birth

Do you have a spinal cord injury? Yes No

Injury is: Complete Incomplete

Level of injury

Date of injury

Application must be submitted within SIX months of injury.

HOW WOULD FUNDS BE USED

Please provide a line item description of ALL items requesting funding for and approximate amount of each item:

(Must be completed in detail for application to be considered)

How did you find out about this grant opportunity?

Amount requested:

(up to $1,000 / Not guaranteed & must be justified)

RELEASES / REQUIRED SIGNATURES: ALL MUST BE SIGNED FOR APPLICATION TO BE CONSIDERED

Photo, Media and Copyright Release

I, _____, do hereby grant the Brain Injury Association of Louisiana/United Spinal Association of Louisiana (BIALA), its employees, representatives, board members and volunteers the right to use any photographs/videos of me and my property in connection with the this grant. I authorize BIALA, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that BIALA may use such photographs/videos of me with or without my name and for any lawful purpose, including, but not limited to purposes such as publicity, marketing materials, social media, illustration, advertising, and Web content. When applicable, photographs will not be taken of recipient using bathroom equipment unless fully dressed to demonstrate use of equipment.

Liability Release

The undersigned participant and/or legal guardian do hereby waive, release, absolve, forever discharge, and do further agree to indemnify and hold BIALA, its employees, board of directors, volunteers, and charitable donors harmless from and all claims, damages, losses and/or expenses arising out of any items purchased or services utilized through funds provided by BIALA. I/we assume all liability for any and all personal injury, bodily injury, illness, property damage or medical expenses that occurs as a result of using any items purchased or services utilized through funds provided by BIALA. I/we also agree that we will not bring any lawsuits nor make any demands nor pursue any complaints against BIALA as a result of my/our participation in BIALA's Craig Cares program. Agreement to this Release also warrants that participation in this program is voluntary and the participant and undersigned understand any risks involved with items purchased or services utilized. I/we, the undersigned participant or legal guardian, hereby gives my/our consent to his/her participation in BIALA's Craig Cares program.

I AGREE TO ALL ABOVE TERMS AND CONDITIONS OF THE PHOTO, MEDIA AND COPYRIGHT RELEASE AND LIABILITY RELEASE (must be signed):

Participant (signature): _____ **Date:** _____

Legal Guardian (signature): _____ **Date:** _____

I understand I will need to show proof of purchase in order to apply for future grants Yes No

If I am not currently a member of this organization, I agree to be signed up for free membership Yes No

Applicant/Representative (signature): _____ **Date:** _____

Submit application to: kim@biala.org

More Information : https://www.biala.org/resource-center/biala-programs