

World Heart Games Team Scholarship Application Form

AACVPR is proud to provide financial support to a program team that is committed to attending the 2023 World Heart Games in Demorest, GA. This scholarship is intended for teams consisting of program staff and patients who will actively fundraise and raise support to offset the costs of attending this unique event. The scholarship may be used to help defray the costs of travel, lodging, and expenses to and from the event.

Learn more about the World Heart Games online:

<https://www.acsm.org/attend-connect/events-and-conferences/acsm-world-heart-games>

Application Steps (Online Application Available)

1. Provide a narrative on the benefits of participating in the World Heart Games. **Include why you want to send a team to the World Heart Games, and explain how you plan to organize the team and fundraise (publicly, privately, or from your institution/other organizations). Please limit your response to no more than 500 words.**
2. Provide a separate narrative on the way your program supports your patients and has a positive impact on your patient population/community. **Please limit your response to no more than 500 words.**
3. Complete the application form found below.
4. Send all documents via email to aacvpr@aacvpr.org.

Applicants must be able and willing to send a team of staff and patients to **Piedmont University in Demorest, GA** from **June 20-21, 2025**. Scholarship applications will be reviewed and winners will be selected by the AACVPR Executive Committee/Awards Committee. Awards per team/program will not exceed USD \$1,000.

Deadline for submissions is March 31st, 2025

1. Your Name: _____
2. Your Email and Phone: _____
3. Your title: _____
4. Program Name: _____
5. Parent Facility/System (if applicable): _____
6. Number of Program Staff (Full and Part-time): _____
7. Number of patients seen annually: _____
8. Is your program AACVPR-certified?
 - Yes
 - No

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9. Are you or another staff person a current AACVPR Member?

- Yes
- No

9a. If you checked "yes", please list the name(s) of the member(s): _____

10. Will your facility/organization pay for some or all of your costs (staff and patients) to attend this event?

- Yes
- No

10a. If the answer to the previous question is "yes," check all that apply:

- My organization will pay for airfare
- My organization will pay for registration
- My organization will pay for lodging
- My organization will pay for food/miscellaneous expenses

11. How many staff members do you plan to send to the World Heart Games? _____

12. How many athletes do you plan to send to the World Heart Games? _____

13. Have you/has your program attended a World Heart Games before?

- Yes
- No