



PENNSYLVANIA LIONS
HEARING RESEARCH FOUNDATION, Inc.
 EXECUTIVE OFFICE – 269 TOWER RD, WEATHERLY, PA 18255
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PDG JOHN R CRONE FELLOWSHIP APPLICATION

1. Please print name exactly as it should appear

NAME:

2. Please check the appropriate box for recipient

Lion PDG

Lioness Leo

Name of Club:

District:

3. A donation of \$500 is required for the Fellowship payable to PA Lions Hearing Research Foundation

4. Name of DONOR, if different than recipient

NAME:

5. Donation is coming from

Personal Club

District Other

6. Please print where award should be sent

NAME:

ADDRESS:

CITY/STATE/ZIP:

PHONE:

7. Date required: _____

Signature of donor: _____

Mail to:

PA Lions Hearing Research Foundation

704 Epirus Hill

Clarks Summit, PA 18411

OFFICE USE ONLY:

Date received _____

Check # _____ Amount _____

Date ordered _____

Date mailed _____

Fellow number _____

Date sent to treasurer _____