



**DAP USE ONLY**

State: \_\_\_\_\_

Date Received: \_\_\_\_\_

Approved by: \_\_\_\_\_

Kent Gade, National Director  
407 East 22<sup>nd</sup> Street, Atlantic, IA 50022  
712-789-0731 – [kgade1@outlook.com](mailto:kgade1@outlook.com)

## The Elks Drug Awareness Program Presents: Heather Di Blasi

Motivational/drug-contest speaker, author and consultant, Heather Di Blasi has teamed up with the Elks Drug Awareness Program to bring her fact-filled, inspirational talks, regarding alcohol, marijuana, and other drugs, to elementary, middle school and high school students. Heather also provided a commonsense program for parents, teachers, and educators to help youth in your Elks Community.

To be considered for this incredible opportunity, please fill out all sections of this application completely. Up to 15 states will be selected to host a visit or webinar(s) from Heather Di Blasi to speak to local youth, parents, and Elks. If your state is selected, Heather Di Blasi will either:

- Visit your state for 1-3 days to speak at schools (or other youth programs), Elk's activities, community partnerships and parent groups (in person visits)
- Or provide webinars (online). Webinars will be presented in the same manner with humor and interactive engagement.

All State DAP Chairs are eligible to apply.

### **In Person Visits Only:**

If selected, your State Association must contribute \$550 to be paid to Heather Di Blasi directly to cover a small portion of related travel fees. In addition, the State DAP Chair is responsible for coordinating all local transportation, meals, lodging and volunteers to help with displays and distribution of materials.

### **Webinars Only:**

There is no \$550 contribution necessary for online webinars.

Please specify choice(s):

( ) In Person Visit

( ) Webinar Visit

**Applications are reviewed on a first-come, first-served basis.**

**Only applications made on this official form and signed by the State DAP Chair will be considered.**

**For more information, please contact the DAP National Director, Kent Gade.  
His contact information is on this letterhead.**

State: \_\_\_\_\_

<b>State DAP Chair – Primary Contact</b>		<b>Secondary Contact (Optional)</b>	
Name:		Name:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Daytime Phone:		Daytime Phone:	
Evening Phone:		Evening Phone:	
Fax:		Fax:	
Email:		Email:	
Please provide the preferred dates for Heather Di Blasi visit/webinar:			
1)			
2)			
3)			
Identify the Elks community or communities Heather Di Blasi would visit during her visit:			
How will Elks from your state be involved in this project?			
How was the need for this visit determined?			

How would you publicize Heather Di Blasi visiting? Include plans for local media coverage and community leaders

Do you anticipate other funding sources? If so, please explain:

Only applications made on this official form and signed by the State DAP Chair will be considered.

By signing this application, you agree to complete the Final Report Form that will be sent to you upon approval of your application. The signature on this application confirms that the State DAP Chair understands and accepts these responsibilities.

\_\_\_\_\_  
State DAP Chair Signature

\_\_\_\_\_  
Date

**Please send your completed, original form to:**

Kent Gade, National Director  
Elks Drug Awareness Program  
407 East 22<sup>nd</sup> Street  
Atlantic, IA 50022  
[kgade1@outlook.com](mailto:kgade1@outlook.com)