

**Part I. NOTICE OF INTENT**  
 Send this portion prior to providing photographic services.



**Smiles for Katie Special Child Family Photography Grant Program**

**Part I. Information for the Photographer**

Separate this page, read, sign and return to SKPA prior to providing services for each family.

**Procedure**

1. The photographer must have achieved Special Kids Photography of America accreditation.
2. Photographer consults with the service provider (doctor, therapist, clinician, etc.) about program rules.
3. Care provider identifies an appropriate worthy family, fills out the top portion of Part I and signs it.
4. Service provider provides family with additional details about the Smiles Program.
5. Service provider helps family fill out the form, then gives it to the family to process with photographer.
6. Service provider provides photographer's contact information to the family.
7. The family contacts the photographer to arrange for photographic services.
8. The photographer makes an appointment to provide photographic services for the family.
9. Photographic services are provided for the family.
10. Send a digital copy or print image to SKPA of the completed results.
11. Photographer may request \$100 upon submission of print or donate it back to SKPA in exchange for a donation receipt from SKPA for tax purposes (consult with financial specialist).

**Details and Rules**

1. Processing fee of \$8 may be paid by check (to SKPA) or on the SKPA website via PayPal.
2. Fee may be paid by parent, care provider, another donor or photographer.
3. Until further notice, the photographer is paid \$100 per family for session and 8x10 print (or smaller).
4. Unless otherwise arranged, the photographer is allowed one family per month, up to 5 families per year.
5. This grant for the photographer is intended as "assistance" and may or may not cover full fees as charged by the photographer under his/her normal business model.
6. All other services for this family must be considered "donations" by the photographer, with no "extra sell" of products or services in connection with each session.
7. Since there are so many families who are burdened with medical or therapeutic services, this program is meant to help the photographer help more families without experiencing financial stress. Nevertheless, photographer is expected to provide some degree of donated time or resources on their own.
8. Details and rules explained on this application may be changed at any time and without prior notice.
9. **Funding for this program is limited and is dependent on the generosity of grant or corporate support.** Contact SKPA prior to each additional session to learn if family photo grants are still available.
10. Photographers must abide by the high moral code and standards put forth by Special Kids Photography of America. Consult [www.specialkidsphotography.com](http://www.specialkidsphotography.com) for additional information.

Photographer		for (applicant)	
Address	City	State	Zio
<b>Signature</b>	Date	\$8 fee paid by <input type="checkbox"/> Check	<input type="checkbox"/> PayPal
Comment			

**Special Kids Photography of America**

info@specialkidsphotography.com . 1497 N 775 West, Washington, UT 84780 . 435.627.1628

**Part II. APPLICATION**  
 Return this portion with photo  
 after photo session.



**Smiles for Katie Special Child Family Photography Grant Program Application**  
 (Complete this Application on-line or use back for writing, matching A, B, C with information on back of this form)



The *Smiles for Katie Program* provides photographic services to families of children with special needs (disabled or seriously ill). It was inspired by an angelic 4-year-old named Katie, who passed away just a few days after a SKPA-trained photographer captured her beautiful, smiling image. Her parents are sincerely grateful to the photographer who was inspired to schedule the session a day or two before the family went on vacation. Katie passed away while the family was “on the road.” They cherish the images of their little cherub.

To qualify for this service, a family with a special child **must be recommended by a teacher, social worker, physician, nurse or other service/care provider.** This application is not based on income—only need. Some families are burdened with medical or therapy demands; extra expenditure for a professional photograph would present a hardship. There is a nominal \$8 processing fee for this application. It may be paid by the applicant or any other person, including the photographer. This grant provides one photo session and one 8x10 (or smaller) printed image.

<b>Service Provider Information</b>		Title/Position
Referral by		Phone
Employed by		Date
City	State	<b>Signature</b>
<b>A. This family qualifies for these services because</b>		
<b>Parent</b>		Phone
Address		Cell
City, State, zip		Child's Name
Child's Condition	Age	<b>Signature</b>
<b>B. Comment</b>		
<b>Photographer</b>		Studio
Photographer's email		Phone
Date of session		Date Photo(s) provided
City	State	<b>Signature</b>
<b>C. What is to be provided?</b>		

Special Kids Photography of America does not endorse the technical photographic aptitude or personal character of photographers. Photographers participating in the Smiles for Katie program have taken steps to familiarize themselves with differing needs of children with special needs. Accreditation means a photographer has completed a Special Kids Photography of America workshop, has passed a written test and submitted images reviewed and approved by a panel of judges. SKPA does not endorse the quality of the imagery nor does it speak to the level of experience a photographer may possess. Families are encouraged to meet with the photographer to discuss these issues prior to hiring their services. Photographers are in no way employed by, nor recommended by, Special Kids Photography of America. They are participating in this program as a helpful resource to families seeking photographic services for their special children. I agree to hold SKPA or any cooperating funding agency harmless.

Parent has read and agrees to the above disclaimer. Signature of Parent \_\_\_\_\_

**SPECIAL KIDS PHOTOGRAPHY OF AMERICA**  
 info@specialkidsphotography.com . 1497 N 775 West, Washington, UT 84780  
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