

Emergency Support Application – St. David’s Society of the State of New York



STEP 1 - Please complete the fields below:

This is for the Society to follow up.

Full Name: _____

Address: _____

Contact: email address: _____ phone: _____

Connection to the Society: _____

Connection to other Welsh Society: _____

Connection to Wales: _____

STEP 2 – Describe Your Financial Emergency

STEP 3 – Print the completed form and mail it to the following address:

St. David’s Society of the State of New York
47 Fifth Avenue, New York, NY 10003