



Handbell Musicians  
OF AMERICA

| Area 7

Minnesota - North Dakota - South Dakota - Wisconsin - Manitoba

## AREA 7 BELLTREE GRANT PROJECT

The Area 7 Committee for Handbells in Music Education (hereafter referred to as C.H.I.M.E.), under the supervision of the American Guild of English Handbell Ringers, Inc. (dba Handbell Musicians of America hereafter referred to as HMA) Area 7 Board of Directors, wishes to encourage schools, churches and other educational institutions to develop music education programs using handbells or handchimes. To support the development of such programs, The AREA 7 C.H.I.M.E. is offering a belltree (BT) grant program to organizations in Minnesota, Wisconsin, North Dakota, South Dakota and Manitoba.

This grant is for BT equipment only. Please use the Area 7 HMA, C.H.I.M.E. Grant Application to apply for handbells.

The specifics of this program are listed below. This document also includes an application form. Anyone interested in applying for an equipment grant should complete the application and return it to the address indicated herein.

### RESPONSIBILITY OF AREA 7

1. Provide the following equipment:
  - a. 1 Belltree stand
  - b. 2 belltree arms
  - c. 2 Malmark blue mallets
  - d. 1 dozen dowels and hairband separators
  - e. 2 Belltree dowel processional poles
  - f. 2 Malmark BT Black Mallets (C6-G7)
  - g. Gear bag to hold all equipment
2. Provide access to BT knowledge library
3. Provide a support network of experienced ringers and directors

### RESPONSIBILITY OF ORGANIZATION

1. Repair or replacement of lost or damaged equipment, based on the inspection by an authorized Area 7 representative.
2. Pay postage and/or shipping fees for the return of the equipment to Area 7 or to the next designated site as directed to by the C.H.I.M.E. Representative.
3. Grant Area 7 permission to photograph and/or audio/video tape the use of the belltree equipment, for marketing purposes only. See attached authorization for minors.

## RESPONSIBILITY OF THE MUSIC TEACHER, DIRECTOR OR INDIVIDUAL

1. Make full use of the mentor provided by Area 7
2. Use belltree equipment in at least one performance
3. Begin the necessary planning (i.e., fund raising and scheduling) to continue the BT program following the grant.
4. At least one of the following activities will be required:
  - a. attend a local or regional HMA conference
  - b. attend an Area 7 or National Conference
  - c. attend an Area or National Director's Seminar
  - d. write a brief report/article concerning the project for Clapper Chatter, Area 7's Newsletter

## FINAL REPORT

A final evaluation of the project must be sent to the Area 7 C.H.I.M.E. representative within two months of the conclusion of the grant. This report must include an evaluation of the impact the project had on the school and its music program. Supportive material (i.e., programs, video tapes of classroom activities and performances, student evaluations or responses and other appropriate materials) must be included.

## ADDITIONAL INFORMATION

Contact: Area 7 C.H.I.M.E. Grant Coordinator, [chime.area7@handbellmusicians.org](mailto:chime.area7@handbellmusicians.org)

The name of the current Chime Coordinator is available on the Area 7 Website:  
[www.area7.handbellmusicians.org](http://www.area7.handbellmusicians.org)



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## AREA 7 HMA BT GRANT PROJECT APPLICATION

APPLICANT'S NAME \_\_\_\_\_

HMA MEMBER # \_\_\_\_\_

PERSONAL CONTACT INFORMATION:

ADDRESS \_\_\_\_\_

CITY, STATE ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

ORGANIZATION CONTACT INFORMATION:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY STATE ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

In the space below, describe how you intend to use the BT equipment

Please specify the dates for the requested grant.

Beginning Date \_\_\_\_\_

Ending Date \_\_\_\_\_



## AREA 7 HMA BELLTREE GRANT PROJECT

### ASSURANCES AND AGREEMENTS

I certify that the statements in this grant application are true, accurate and complete to the best of my knowledge. If selected, I agree to abide by the terms of the grant as detailed. If selected, I agree to accept responsibility for the proper care and maintenance of the grant materials. I will assume responsibility for their safe return or replacement, if damaged, as described in number 1 UNDER "RESPONSIBILITY OF ORGANIZATION." In compliance with HMA Area 7, HMA National and U. S. copyright laws, I agree not to photocopy any music or printed materials provided me by Area 7 HMA.

\_\_\_\_\_

APPLICANT SIGNATURE

\_\_\_\_\_

DATE

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FOR AREA 7 USE ONLY

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

Applicant Number \_\_\_\_\_

Reviewed \_\_\_\_\_

Result \_\_\_\_\_

\_\_\_\_\_

Approved by - C.H.I.M.E. Grant Coordinator

\_\_\_\_\_

DATE

Date Applicant Notified \_\_\_\_\_

Date Equipment Delivered \_\_\_\_\_

Date Equipment Returned \_\_\_\_\_

Condition of returned equipment \_\_\_\_\_



## AREA 7 HMA BELLTREE GRANT PROJECT

### FINAL EVALUATION

APPLICANT'S NAME \_\_\_\_\_

ORGANIZATION NAME \_\_\_\_\_

Please respond to the following questions as a means of evaluating the success and effectiveness of your handbell/handchime program that was supported by the Area 7 HMA Belltree Grant Program. Please include any additional information you feel will be helpful in the planning and administration of future grants.

Use this page as a cover sheet for your responses.

1. Describe how the belltree equipment enhanced your handbell program. Include the impact on participants. Include any comments by participants and audience members. Provide copies of programs if possible. Discuss plans for use of belltree in your handbell/handchime program.
2. Briefly evaluate the support you received from Area 7 HMA and Area 7 C.H.I.M.E. Include ways you feel we could improve this grant program.
3. List HMA events you participated in during this project. How did these events aid you in this project?



**AREA 7 HMA BELLTREE GRANT PROJECT**  
Consent to Photograph, Videotape and/or present image on the  
Internet

I hereby authorize \_\_\_\_\_ to photograph, videotape, and/or

Name of school, organization, media outlet

present the image on the internet of

\_\_\_\_\_  
Printed name(s) of minor aged child(ren)

for the purpose of providing working examples of the use of handbells and belltrees for

1. This facility's training and in-service program
2. Sharing positive program examples in the community
3. Regional and National professional conferences of HMA, Inc.
4. For use by other professional education organizations

I understand that the consent will be effective from to Grant "begin" date whatever date is deemed appropriate by Area 7 HMA and can be withdrawn at any time.

\_\_\_\_\_  
Printed name of legal parent/guardian Relationship to minor

\_\_\_\_\_  
Signature of parent/guardian Date