



**3. DISTRICT 5790 CLUB** - List the club in District 5790 that assumes joint responsibility for the project.

Club Ft Worth Horizon Club ID # (IF Known) 26,735 District 5790, USA

Project Committee: A committee of at least two Rotarians must be established by the primary host partner to oversee the project for its duration, even if the project continues into another Rotary year.

Primary Contact (must be member of above club/district)

Additional Contact (must be member of above club/district)

Name Hyacinth Onyekanne  
Member ID # (if known) \_\_\_\_\_  
Rotary Club Ft Worth Horizon  
District 5790  
Position/Title Secretary

Name Claudio Cirulli  
Member ID # (if known) \_\_\_\_\_  
Rotary Club Ft Worth Horizon  
District 5790  
Position/Title President

Email hyacinth@ftwha.org  
Street Address 1813 Spicewood  
City/State/Postal Code Fort Worth, TX 76132  
Country USA

Email ccirulli@yahoo.com  
Street Address 7026 Shadow Creek  
City/State/Postal Code Fort Worth, TX 76132  
Country USA

Telephone – Home 817- 293-4410

Telephone – Home 817-370-9669

Telephone – Office (817) 333-3604

Telephone – Office 817-797-8896

Fax \_\_\_\_\_

Fax 810-815-0497

**4. PRIMARY INTERNATIONAL PARTNER OUTSIDE THE USA (IF APPLICABLE)** - List the club or district *in the project country* that assumes joint responsibility for the project. N/A

Project Committee: A committee of at least two Rotarians must be established by the primary international partner to oversee the project for its duration, even if the project continues into another Rotary year.

N/A

Club \_\_\_\_\_ Club ID # (IF Known) \_\_\_\_\_ District \_\_\_\_\_ Country \_\_\_\_\_

Primary Contact (must be member of above club/district)

Additional Contact (must be member of above club/district)

Name N/A  
Member ID # (if known) \_\_\_\_\_  
Rotary Club \_\_\_\_\_  
District \_\_\_\_\_  
Position/Title \_\_\_\_\_

Name N/A  
Member ID # (if known) \_\_\_\_\_  
Rotary Club \_\_\_\_\_  
District \_\_\_\_\_  
Position/Title \_\_\_\_\_

Email \_\_\_\_\_  
Street Address \_\_\_\_\_  
City/State/Postal Code \_\_\_\_\_  
Country \_\_\_\_\_

Email \_\_\_\_\_  
Street Address \_\_\_\_\_  
City/State/Postal Code \_\_\_\_\_  
Country \_\_\_\_\_

Telephone – Home \_\_\_\_\_

Telephone – Home \_\_\_\_\_

Telephone – Office \_\_\_\_\_

Telephone – Office \_\_\_\_\_

Fax \_\_\_\_\_

Fax \_\_\_\_\_





**9. AGREEMENT FORM**

This District 5790 DSG Application and Agreement Form (collectively "Agreement") is entered into by the clubs and/or districts (partners) as identified below and Rotary International District 5790 (5790). In consideration of receiving this District 5790 Project Grant, the partners agree:

1. That they have received and read this document and will abide by all the terms and conditions set forth herein.
2. To utilize District 5790 DSG funds to support a short-term humanitarian project, as outlined in this application, which benefits a community in need. Funds provided by 5790 will not be used for any purposes other than those considered eligible by TRF as described herein.
3. To defend, indemnify, and hold harmless District 5790, Rotary International and The Rotary Foundation, their respective Directors, Trustees, Officers, employees, and agents (collectively "5790/RIITRF") from any and all claims (including claims of subrogation), demands, actions, damages, losses, judgments, costs, fines, awards, liabilities, or expenses (including without limitation reasonable attorney's fees and other legal expenses) collectively ('losses') asserted against or recovered from 5790/RIITRF that result or arise directly or indirectly from the project, including any acts or omissions of the partners.
4. To keep 5790 informed on the project's progress by submitting progress reports every three months during the implementation of the project and submitting the final report with complete financial accounting within two months of the project's completion. The partners will immediately inform 5790 of any significant problems with the implementation of the project or deviations from the project, including deviations in the budget, as approved.
5. That this Agreement may be cancelled by 5790 for any reason without notice upon the failure of the partners to abide by the terms and conditions set forth in this Agreement. The partners agree to return any grant funds, in their entirety, including any interest earned, should funds be misused or used for ineligible purposes.
6. This Agreement is governed by the laws of the State of Texas, USA Any action brought in connection with this Agreement shall be filed in the County of Tarrant, State of Texas, USA The partners agree to submit to the jurisdiction other Circuit Court of Tarrant County for the State of Texas.

By signing below, the partners acknowledge and accept the terms and conditions of this Agreement.

District 5790 Partner (Club President)

Name Claudio Cirulli

Title President

Club, District 5790 Fort Worth Horizon

Signature *Claudio Cirulli*

Date 7-30-07

International Partner (If applicable) Club President

Name N/A

Title \_\_\_\_\_

Club \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Send the completed Matching Grants Application and Agreement Form and any attachments to:**

Dan Morales, Past District Governor  
 Rotary International, District 5790  
 District Simplified Grants Chair  
 2200 W. Park Row #100  
 Arlington, TX 76103

Telephone (W) 817-261-6284 (H) 817-531-3804 (F) 817-277-8130 E-mail [workoutdan@aol.com](mailto:workoutdan@aol.com)

*Please submit forms at any time.*



**ROTARY CLUB of FORT WORTH HORIZON  
INTERNATIONAL PROJECT 2007**

Name of Hospital: Immaculate Heart Hospital and Maternity

Location: Urualla, Ideato Local Government Area in Imo State, Nigeria.

Needs: Modern Medical Equipment to help in providing urgently needed medical services to the population that it serves. At this time we are trying to provide Incubator for the hospital at the cost of \$3,000.00 or about 360,000.00 Naira.

Management: The hospital is managed by Nuns from the Immaculate Heart Convent under the able leadership of Sr. Mary Ancilla Ijara, Hospital Administrator. The hospital has only two doctors with no specialization. This hospital has been serving this population since 1948 and depends mainly on charity since most of the patients can not afford the cost of their treatment.

Time Frame: We are proposing to provide this equipment by November 2007.

Fund Raising: Our club has started raising half of the needed money in the following ways: Friends of Rotary program where we are recruiting prospective members to become friends of Rotary for \$30.00, selling items on e-bay which has generated some money, Coupon Book sales, to name a few.

Participation: We are working directly with the hospital since there are no clubs close to this city and due to ethnic diversities, surrounding clubs are not willing to assist. We are blessed to have one of our members who is a native of the city. He travels home at least once a year and has visited this hospital several times and met with the Administration and established direct contact with them. He will handle the supervision of this project to ensure the equipment gets to its destination and is used for the intended purpose. He brought back a video documentation of the hospital showing the current situation and the lack of medical equipment. A copy of the video can be made available to you if you so wish.

Purchase & Delivery: To avoid incurring extra costs, this equipment will be purchased from Siemens in Nigeria and will be delivered directly to the hospital. This arrangement also will help provide the training and maintenance of the equipment since the equipment sold in Nigeria is already equipped for the voltage in use there.

With 30-40 births per month an incubator will assist them in caring for the infants that sometimes die as a result of minor ailments that could have been prevented. Infant care is very critical and having the right equipment will help them preserve lives. They are depending on this.

Sr Mary Ancilla Ijara  
Administrator, Immaculate Heart Hospital  
Urualla, Ideato LGA, Imo State, Nigeria

Sr Dr Pascalina Ogechukwu  
Doctor, Immaculate Heart Hospital  
011-234-703-151-8606