

NOTE: When submitting your request, be sure to provide your name and contact information so your governing body can reach out to you with any additional questions, invite you to an event, and/or send you the final proclamation.

Bleeding Disorders Awareness Month (March YEAR) Proclamation Request Template

WHEREAS, inheritable blood and bleeding disorders are rare but chronic diseases in the United States;

WHEREAS, diseases such as hemophilia and von Willebrand's disease affect upwards of 30,000 patients nationwide;

WHEREAS, research suggests the cause of inheritable blood and bleeding disorders can be genetic or random mutations;

WHEREAS, the symptoms of inheritable blood and bleeding disorders vary from person to person but can include prolonged bleeding; excessive or unexplained bruising; frequent nosebleeds; heavy menstrual periods; and others

WHEREAS, volunteers, researchers, caregivers, and medical professionals are working to improve the quality of life for persons and families living with inheritable blood and bleeding disorders;

WHEREAS, increased research, education, and community support services such as those provided by the National Hemophilia Foundation and other organizations are needed to find more effective and affordable treatments and to provide access to quality care to those living with these diseases today;

NOW, THEREFORE, I/WE, _____, Mayor/Governor/Governing Body of the City/County/State of _____, do hereby proclaim the month of March in twenty twenty-YEAR as BLEEDING DISORDERS AWARENESS MONTH. This is given under my hand in these free United States in the City of _____, and to which I have caused the Seal of the City/County/State of _____ to be affixed and have made this proclamation public.

Mayor/Governor/Governing Body

Attest:
