



Based on availability of funding, scholarship assistance may be offered on a full or partial basis to cover your child's membership fee. Please complete the following form and attach copies of necessary documents. You will be notified once your scholarship has been processed.

CLUB MEMBER'S LAST NAME: _____

First Name of Child Registering	Date of Birth	Grade	School Attending	Free/ Reduced Lunch?
				Yes Or No
				Yes Or No
				Yes Or No
				Yes Or No
				Yes Or No

Is this a Single Parent Household? Yes _____ No _____

Total number of people who live in this household: _____

One following documents must be submitted for one guardian of the registering child(ren).

Copy of last years tax return
Last 2 pay stubs
Proof of Unemployment
Letter from the district for Free/Reduced Lunch at School



Please list ALL Monthly Household Income for ALL household members:

Source	1- Self	2- Other	3-Other	4-Other	Total
Gross Wages, Salaries, Tips, etc.					\$
Social Security, Unemployment					\$
Alimony, Child Support, Military Family Allotments					\$
Income from Business, Self Employment					\$
Disability					\$
Food Stamps					\$
Other Income					\$

If appropriate, please provide specific information regarding family hardships or special circumstances that you would like considered when reviewing your scholarship application.

I hereby acknowledge that the information that I have given in this scholarship application is correct. I understand that this application will be void if I give false information.

Parent/Guardian Signature: _____ Date: _____

For Front Desk Use Only:

Scholarship Approved at: _____ 50% discount _____ 100% discount _____ Not Approved

Date Approved: _____ Signature: _____