 GRAFTON ATHLETIC BOOSTER CLUB

 2018 SUMMER CAMP

ATHLETIC SCHOLARSHIP APPLICATION

 Grafton High School and Middle School Athletes:

The Grafton Athletic Booster Club announces the continuation of the Summer Camp Scholarship Program. Scholarships are awarded to help offset some of the expenses associated with summer sport camps. If you are interested in applying for the summer camp scholarship, **please complete the attached application and return it to your Coach by Friday, March 16th, 2018.**  **Coaches will then complete their information and send your application to Laura Parker by Thursday, March 22nd.**

The Booster Club’s ***objective*** is to award Summer Camp Scholarships, each in the amount of $100, or as allowed by the budget.

It is the applicant’s responsibility to locate a camp, fulfill their registration requirements, arrange transportation to and from camp, and to cover any expenses over and above the amount of the scholarship award. Applicants must also obtain a recommendation for this scholarship from their appropriate Grafton team coach.

In compliance with VHSL regulations, payments will not be made to the athlete. Payments in the amount of the respective scholarship will be made directly to the camp of your choice. No awarded scholarship will exceed the cost of camp. If you wish to apply for more than one sport, you must complete an application for each sport and obtain a recommendation from the appropriate team coach. Summer Camp Scholarship Awards may not be applied to more than one camp or athletic training season.

**ELIGIBILITY**: Applicant must meet the following eligibility requirements:

 A) Applicant or applicant’s parent/guardian must be a member in good standing of

 the Grafton Athletic Booster Club no later than March 10th , 2018.

 B) Applicant must be returning to GHS or GMS for the 2018-2019 school year.

 C) Previous winners are not eligible to apply for the scholarship assistance to attend

 a camp for the sport in which they have been awarded assistance in prior years.

 D) The applicant’s parent/guardian must sign this application before it will be

 considered for an award.

 E) Application must be complete and submitted to your team Coach by Friday, March 16th, 2017.

**GENERAL INFORMATION: (Please Print)**

**Applicant’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian Names:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GABC Member: Yes or No**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardain Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade Level: \_\_\_\_\_\_\_\_\_\_\_**

**Camp Name/Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Camp Cost:\_\_\_\_\_\_\_\_\_\_\_\_**

**Camp Registration Deadline Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check Payable To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GABC SUMMER CAMP SCHOLARSHIP APPLICATION**

TO BE COMPLETED BY ATHLETE:

**A. How do you contribute to your community?** (Volunteer, work, etc…)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Tell me why you need or want this scholarship?**

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**C. Tell me how you contribute to your team’s overall success?**

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**TO BE COMPLETED BY TEAM COACH:**

Do not return this application to the athlete. **Please do not put the athlete’s name on this page.** When complete, return the application to Coach Parker no later than March 22nd 2017. If you have any questions, please call Shannon Davie at 757-879-7593 or email amberandkaylinzmom@cox.net. Please return both pages of the application. Do not separate the pages.

**COACH’S COMMENTS:**

Please make any comments that might assist the Scholarship Committee in selecting the most deserving athlete and please sign below. *(i.e.* Athletic Ability, Leadership Skills, Work Ethic, Dedication, Citizenship, etc.)
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COACH’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_