



Ski Angel Scholarship 2018-2019

DMRA Scholarship Application

All requested information must accompany application. Incomplete applications will not be considered.

Scholarship Award Checklist – All information will remain confidential.

- ✓ Scholarship Application (one per family)
- ✓ Letter of Request

Conditions of Scholarship Awards: All participants receiving a scholarship must abide by the following conditions. Failure to meet these requirements will result in the forfeiture of the award.

- ✓ Each recipient will meet with DMRA representative to finalize award and schedule volunteer opportunities.
- ✓ Scholarships are awarded for a specified amount of time.
- ✓ Recipient will abide by the National Ski Association Responsibility Code.
- ✓ Disciplinary actions within DMRA may revoke scholarship award.

Personal Information

First Name: _____ Last Name: _____

Parent or Guardian Name if under the age of 18: _____

Street Address: _____

City, State and Zip: _____

Home Phone: _____

Cell/Work Phone: _____

Email: _____

Please list all participants. Attach additional page if necessary.

Full Name: _____

Birthdate (DD/MM/YYYY): _____

Full Name: _____

Birthdate (DD/MM/YYYY): _____

Full Name: _____

Birthdate (DD/MM/YYYY): _____

Full Name: _____

Birthdate (DD/MM/YYYY): _____



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Please check the programs requested:

___ Individual Season Pass

___ Family Pass (based on # of individuals in family)

___ Ski or Snowboard Camp or other DMRA Sponsored activity (noted below):

I certify that the above information is accurate to the best of my knowledge. I hereby give permission for the DMRA to use my information, excluding name and address, to seek future funding through grants or other opportunities. I have read and understand the attached document titled "DMRA Scholarship and Application and Information."

Signature _____ Date _____

DMRA Office Use Only

Type of scholarship awarded: _____

Amount of scholarship award: _____

Date of Approval: _____

Date contacted: _____

Notes: