Aim Forward Field Hockey Foundation
Scholarship Application

CONFIDENTIAL APPLICATION

ATHLETE & FAMILY INFORMATION

Athlete Name

_____

Parent(s) Name

_____

Athlete's Email Address

_____

Parent's Email Address

_____

Phone Number

_____

Application Date

_____

Age Group (circle one): U10 U12 U14 U16 U19

SCHOLARSHIP REQUEST

What program are you requesting scholarship funds for? (circle one or more)

Club Fees League Fees Tournament Camp Other: _____

Season (e.g., fall, winter, spring): _____

Amount of Funds Requested: $_____

IMPACT STATEMENT

In a few sentences, explain how a scholarship grant would impact your daughter's participation in our program:

_____

_____

_____

_____

VOLUNTEER OPPORTUNITY

Are you or your daughter willing to volunteer to help offset costs? YES NO

If yes, please specify your area of interest or skills (e.g., office work, tournament support, communications, officiating, design):

_____

Submission Instructions

Please submit your confidential application via email to Director Lauren Cornthwaite at **lauren.cornthwaite@aimfieldhockey.com**.