

**WHALEBACK MOUNTAIN CLUB  
2018-2019 SCHOLARSHIP APPLICATION**

Whaleback Mountain Club (WMC) encourages all eligible individuals to participate in our skiing and snowboarding programs. Financial need should not be a deterrent to any individual. The amount of financial support available each season will depend on the amount of scholarship money available and the number of families seeking assistance. Grants are intended for skiers/riders who would not be able to participate in the programs without such assistance.

All requests will be respectfully received and confidentially reviewed by the Scholarship Committee of the WMC board. So that no judgment or subjective thinking will be involved in that review, we must ask for an annual household income disclosure. Your income, the federal guidelines that public schools use to determine who shall receive free or reduced school lunches and DHMC's guidelines for providing free or reduced health screenings, help guide us in our decision making process.

To request financial assistance for the 2018-2019 season, your request must be received no later than December 1st, 2018. Please complete the following:

**Athlete's Name(s)** \_\_\_\_\_

Parents' Names \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Program** MiniCore \_\_\_\_\_ MiniCore Plus \_\_\_\_\_ Core Devo \_\_\_\_\_  
Alpine \_\_\_\_\_ Freestyle \_\_\_\_\_ Snowboard \_\_\_\_\_

**Needs** Equipment \_\_\_\_\_ Season Pass \_\_\_\_\_ Coaching \_\_\_\_\_

**Amount of Scholarship Needed** \_\_\_\_\_ Annual Household Income: \_\_\_\_\_

Total Number of People in your Household: \_\_\_\_\_ Total Number of Dependents: \_\_\_\_\_

Other Considerations: \_\_\_\_\_

**Parents:** Briefly describe your need for assistance. Please include your place of employment, history of you and your child's commitment to the Whaleback Mountain Club organization (including parent commitment to work events) and previous amount of scholarship awarded, if any. Please attach a separate sheet if necessary.

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

**Athletes:** Please write a brief letter and attach it to this form stating your history of (if any) and goals for your commitment to skiing.

**Completed form must be received no later than December 1, 2018.**

You will be notified of our decision by December 15, 2018.

It is expected that all parents of scholarship recipients volunteer their time to WMC by participating in fundraising events.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Athlete's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send completed form to Whaleback Mountain Club, PO Box 434, Lebanon, NH 03766 or email to Jessica Irwin at Jessica@whalebackcoreteam.com

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For office use only: Amount Awarded: \_\_\_\_\_ Approved by: \_\_\_\_\_