

Brattleboro Union High School Athletic Booster Club
P.O. Box 6383
Brattleboro, VT 05302



Sport Camp/Event Scholarship Application

If we cannot read your application, it will be discarded.

Athlete's Name _____ Phone _____

Address _____ Grade _____

Camp/Event Name _____ Sport _____

Camp/Event Address _____

Dates Attending _____

Sports you have participated in at BUHS _____
(and how many years in each sport)

How do you feel your attendance at this camp/event will benefit the BUHS Sports Program and what do you hope to get out of the camp/event?

COACHES RECOMMENDATION: **THIS IS MANDATORY** (achievement, attitude)

The Camp/Event Scholarship is for \$150.00 Checks will be payable directly to the camp/event organization unless an official receipt of payment is attached.

Return to: BUHS Booster Club
PO Box 6383
Brattleboro, VT 05302

We require that all students receiving a camp/event scholarship donate his/her time (or a family member) to the Booster Club during an athletic event.

Student's Signature _____

Parent's Signature _____ Print Name _____

One scholarship will be awarded to one student athlete per 12 months.

Revised 10/2012

Go Colonels