



Scholarship Request Form

Applicant's Name: _____ Today's date: _____

Parent/Adult Name: _____

Class/Session: _____ Start Date: _____

*****LIMIT 1 SESSION*****

Session Cost: \$_____ Total amount you are able to contribute \$_____

Why is it important to you to have your child participate in this program?

Explain briefly why you wish to receive this financial support:

Student

What do you hope to achieve by participating in our sailing program?

Adult Signature: _____

Printed Name: _____

Address: _____ zip _____

Contact Phone: _____ day__ eve__ email _____

With the support of local residents, Lincolnville Boat Club is able to provide financial assistance so any area youth can participate in our program. We ask that you contribute what you can toward the cost. Scholarships are limited to one week or one session per child.

The program director will get in touch with you after reviewing this application and will call or email with the availability of scholarship funding.