## RHINELANDER BASKETBALL ASSOCIATION P.O. Box 521 Rhinelander, WI 54501

## FINANCIAL SCHOLARSHIP APPLICATION Privacy Policy

The Rhinelander Basketball Association offers scholarships to youth basketball players in need of financial assistance. It is important to understand that financial aid is directly dependent on the amount of funds available and the number of funds received. In an effort to fairly distribute what funds we have available, please complete the application. Any scholarship funds received are used to supplement Club fees only; team traveling expenses and additional events are not covered by scholarships.

Financial assistance is limited and is awarded for each season. A new application needs to be submitted for each season. Note that financial aid awarded during a basketball season does not necessarily indicate financial assistance for future seasons. Remember that monthly payment plans are also available for those in Competitive basketball.

Financial assistance eligibility: (Please initial each item)

\_\_\_ 1. Parent(s)/Guardian(s) must be willing to discuss personal financial matters with a member of the Scholarship Committee, if required. (All information is confidential) The Player must commit to attending all practices, games and tournaments (if 2. scheduled). If player decides to guit or no longer desires to play any and all uniforms must be returned to the Rhinelander Basketball Association. \_\_\_\_ 3. Parent(s)/Guardian(s) understand that they will be responsible for paying any balance of the player's fees that are not covered by financial assistance. 4. Parent(s)/Guardian(s) understand that any Financial Scholarships received will not cover any portion of the serve hours that are required by each competitive family. 100% Financial Assistance is available. There will be mandatory service hours which will include setting up before tournaments, concessions, raffle and/or clean up after the tournaments. If a Parent/Guardian is not able to attend then it is their responsibility to find someone to fill in for them.

To apply for a scholarship through the Rhinelander Basketball Association, please submit the following application to the address listed above which will be forwarded to the Scholarship Committee.

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| Players Name(s):   |                   |                         |                  |
|--|-------------------|-------------------------|------------------|
| Scholarship Amount Requested:  | Competitive       | Little Hodags           | Little Dribblers |
| (Circle all that apply)  | Full Scholarship  | Partial Scholarshi      | p Payments       |
| Father's/Guardian's Name:  |                   |                         |                  |
| Father's/Guardian's Employer:  |                   |                         |                  |
| Mother's/Guardian's Name:  |                   |                         |                  |
| Mother's/Guardian's Employer:  |                   |                         |                  |
| Home Address:  |                   |                         |                  |
| Cell/Home/Daytime Phone:   |                   |                         |                  |
| Number of children in household:   | :                 |                         |                  |
| Email Address:   |                   |                         |                  |
| Receive financial assistance from  | other agencies: ( | Example: Free or Reduce | d Lunch)         |
| If yes, please list:   |                   |                         |                  |
|  |                   |                         |                  |
| Other reason for financial reques  | t:                |                         |                  |
| I, hereby state that all supplied infor discrepancies found may result in te scholarships. |                   |                         | •                |
|  |                   | Dated:                  |                  |
| Parent/Guardian Signature  |                   |                         |                  |