

Venice Youth Boating Association, Inc.
1330 Tarpon Center Drive, Venice, FL 34285 - - Phone: 941-468-1719
Scholarship Application – Handwritten Version
(Please print)

Sailor's First Name _____ Sailor's Last Name _____

Sailor's Birth Date _____ Sailor's School _____

For which class & date is this sailor registering? _____

Parent(s)/Guardian(s) Name(s) _____

Address _____
(Street & No.) City / State / Zip

Email Address _____

Telephone number during business hours: _____

Is this application for a partial or full scholarship? Partial or Full

What \$ amount may be paid if only a partial scholarship is available? \$_____

Is the required most recent IRS income tax return attached? Yes or No

Please describe below special circumstances for consideration. Attached a second page, if desired.

I understand scholarships are granted upon basis of need and may cover a portion of the tuition, 10% to 100%. I certify that the above information is correct, and I acknowledge that I have received and read the VYBA's Scholarship Policy. Further I agree and the sailor named in the Application agrees to comply with the VYBA rules of conduct and safety equipment that is required for all sailors.

(Parent/Guardian Signature)

(Date)