



Sport Camp/Event Scholarship Application

- The Camp/Event Scholarship is for \$150.00.
- Please attach the camp brochure or camp/event website to the application.

Athlete's Name: _____

Phone: _____ Grade: _____

Address: _____

Camp Name: _____ Sport: _____

Dates Attending: _____

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?

Sports you have participated in at BUHS and indicate how many years in each sport:



COACHES SIGNATURE

THIS IS MANDATORY * Please have your coach or the Athletic Director send an email to buchsboosterclub@wsesdvt.org in lieu of the signature to verify eligibility.

Please include the paid receipt and include name of parent/guardian and address of parent/guardian to be paid:

Send check to: _____

Address: _____

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

If it is hardship for a parent to pay in advance, please contact the Booster Club's Treasurer at whitxmas@gmail.com. We will work with you on a payment agreement.

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 camp/event scholarship will be awarded to one student athlete per 12 months.

Should you have any questions about the application, please contact us at buchsboosterclub@wsesdvt.org