## North Branch Area Hockey Association (NBAHA) Scholarship Program

The North Branch Area Hockey Association (NBAHA) is committed to fostering youth development by offering access to hockey programs at all levels. To help families manage the costs associated with participation, NBAHA has established an annual endowment scholarship program.



Scholarships may be awarded to eligible applicants who submit a completed application form along with all required documentation. All submissions will be kept strictly confidential and used solely for the purpose of determining scholarship recipients. Scholarship amounts may vary from year to year and are based on available funding and individual circumstances. Submission of an application does not guarantee financial assistance.

Please print clearly when completing the application. Incomplete, inaccurate, illegible, or unsigned forms will not be considered. Email completed applications to **board@northbranchhockey.com** by **September 1st** of the current season.

## Requirements:

Player Name

1. Athletes must be a member of the NBAHA.

Part 3- Parent/Guardian Request Statement

Recipient. Please include any special personal circumstances.

Part 1- Player Information

- 2. Athletes must have no balance from prior NBAHA dues or other events.
- 3. Athletes must be in good standing with the NBAHA, District 10, MN hockey and USA Hockey.
- 4. Athletes must be committed to participate for the complete season of which they are applying for.
- 5. Parent(s) and/or Guardian(s) must be committed to complete volunteer, fundraising, and any additional requirements.
- 6. Application must be completed, legible, accurate and turned in by the deadline.

Address

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Date of Birth	Level:									
	2nd Year	Mite	4th-5th Year Mite/	U8 Sq	uirt/U10	PeeWee/U1	.2 B	antam/U15		
Part 2- Family Information										
Parent/Guardian 1		Address		City		State	Zip			
Phone		Email								
<u> </u>								_		
Parent/Guardian 2		Address			City		State	Zip		
<u> </u>										
Phone		Email								
Family Size	# Siblings playing	Do you receive any other assistance to play hockey? Please list								
l	NBAHA?	l								
Annual Household Income										
\$20k	or less \$20k	-\$40k	k \$40k-\$60k \$60k-\$80k		0k	\$80k-\$100k		\$100k +		

I certify that all information provided in this application is accurate and complete to the best of my knowledge. I
understand that the North Branch Area Hockey Association (NBAHA) will retain this application and any supporting
documents submitted. I further acknowledge that any deliberate misrepresentation of facts may result in disqualification
from scholarshin consideration

On a separate page, please explain why you think the NBAHA Board should select you to be a Scholarship

Parent / Guardian 1 Signature Date	te
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