



**DURHAM STRIDERS YOUTH ASSOCIATION, INC.**  
2012 Scholarship Form

(Please print form in ink, fill in **ALL** questions and sign where signature is required)

NAME \_\_\_\_\_ BIRTH DATE \_\_\_/\_\_\_/\_\_\_ AGE \_\_\_ SEX \_\_\_  
Last First MI

ADDRESS \_\_\_\_\_  
Street City Zip

PARENT OR LEGAL GUARDIAN \_\_\_\_\_

ADDRESS (If different from child's) \_\_\_\_\_

TELEPHONE (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-MAIL \_\_\_\_\_

FORMER DURHAM STRIDERS MEMBER? Yes \_\_\_\_\_ No \_\_\_\_\_

Current School \_\_\_\_\_

Extra Curricular Activities \_\_\_\_\_

Reason for scholarship request: (Please provide as much detail as possible)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much of the \$50 registration fee can the family pay? \$ \_\_\_\_\_

Are you willing to volunteer for the Durham Striders? Yes \_\_\_\_\_ No \_\_\_\_\_  
(You would be contacted at a later date to identify a specific volunteer opportunity)

Parent/Guardian Signature \_\_\_\_\_

Date application received: \_\_\_\_\_

The Durham Striders administration will keep all information **confidential**. Scholarships are based on need as determined by the Durham Striders Youth Association, Inc. All or a portion of current season registration fees will be waived for the athlete **if** money is available. Parents are asked to pay as much of the fee as possible and are encouraged to support the team as a volunteer.

<p>For Office Use Only- Scholarship Approved: Yes _____ No _____ Family Notified: _____</p>
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