Acknowledgement of Application Procedures and Intents For Season 2025-26 Page One of Two

Please read, sign and return this page as part of your application.

Thank you for applying for a Snowsports Scholarship for your child. <u>Please read the</u> scholarship information pages for info on eligibility requirements for each fund.

The scholarships awarded by the Sugarloaf Ski Club, are intended for those families who have financial need. Unfortunately, there is not enough money to give awards to all area students. We do what we can. <u>Eligibilty criteria</u> for each of our funds is on our scholarship information pages.

While we do not ask applicants to supply personal financial information, it should be understood that in <u>applying for these funds you are stating that it would be, at least,</u> <u>a financial hardship for the family, or at worst, your child would not be able to</u> <u>participate in the programs if financial aid were not provided</u>. We rely on you to make this process work.

It should also be understood by the applicant and family that the scholarship recipients and families may be called upon to volunteer for any scholarship fund-raising events or competitions. We are all in this together.

The Complete application **must be mailed** (<u>not hand delivered nor emailed</u>) and **postmarked no later than September 20, 2025** (to Sugarloaf Ski Club, 9008 Main St. Carrabassett Valley, ME 04947

(Note: Sunday Afternoon Boomauger program deadline is through Perfect Turn Office sholman@sugarloaf.com we recommend signing up in November)

If you have questions about the application, or to verify its receipt, **do not call.** Please e-mail: TheClub@sugarloafskiclub.com

<u>Please read our scholarship information pages and also do not wait until the last</u> <u>minute to apply.</u>

By signing below I acknowledge that I have read and understand the above procedures.

Name of Parent or Guardian, Please Print

| Signature | Date |
|-----------|------|
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Page 2

2025-26 SEASON, APPLICATION FOR SNOWSPORT SCHOLARSHIP FUNDS Fill out an application for each student requesting funds:Page Two

| Name | Date of Birth | |
|---|---|--|
| Address | | |
| Town | Zip | |
| PhoneE-mail addr | 'ess | |
| School | Grade | |
| PrintedNames:Parents/Guardians | | |
| Is parent a Sugarloaf Employee? If | yes, Circle: Part Time / Full Time | |
| Is parent a CVA Employee? If | yes, Circle: Part Time / Full Time | |
| Circle athlete's intended program: Minicuffer, Bubblecuffer, Hayburner | , <u>RSU58/Stratton Punch pass</u> <u>CVAWP</u> <u>CVA</u> | |
| <pre>\$Program Cost to family account)</pre> | (after any employee discount is taken into | |
| | following with your Application: tell us in a separate page about your snowsport r this season. | |
| NOTE: This application form is used for a | ll of the Sugarloaf Ski Club managed funds. | |
| APPLICATION DEADLINE IS Sej | ptember 20, 2025 (except for Sunday Afternoon | |

APPLICATION DEADLINE IS September 20, 2025 (<u>except for Sunday Afternoon</u> <u>Boomauger Program, Apply though Perfect Turn in November, check their website</u>) The Committee will meet in early October and inform you of any award given.

For more information e-mail: Theclub@sugarloafskiclub.com In order to be considered for a scholarship, **you must mail application** to:

Sugarloaf Ski Club 9008 Main St Carrabassett Valley ME 04947