

## University High Football Summer Camp

### Scholarship Application

Please follow the scholarship application instructions below carefully. If the instructions are not followed, we will not be able to process your application or grant your scholarship. We will do our best to be able to help everyone. Our funds are limited and we will do the best we can to help as many athletes as we can. Please be considerate of this process and help us help you by completing the process appropriately!

**PLEASE DO NOT REGISTER ONLINE!** If you register online, we are not able to alter your financial obligation, making you ineligible for a scholarship.

- Fill out the form on page two completely. Please make sure to include your e-mail address, because our confirmations are sent out through e-mail. If you do not have an e-mail address please indicate that for us.
- Send the completed form back to the University High School by e-mail at [mcunning@iusd.org](mailto:mcunning@iusd.org) or by mail at University High Athletics 4471 Campus Drive Irvine, CA 92612. Our office staff will process all the applications in a time sensitive manner according to the camp you are applying for, and inform you if you will be given financial assistance. When we inform you about your scholarship application we will also let you know what your balance for camp will be, if any. Please do not contact us for an update on your application unless the camp in question is starting the next week.
- We will not be able to process or grant scholarship applications received after June 15, 2012

Thanks again for your cooperation in making this process go smoothly!

University High Summer Camp Scholarship Registration Form

Please briefly describe your financial need: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

How much of the camp fees are you able to contribute? \_\_\_\_\_.  
(Any amount you can contribute helps us grant more athletes scholarship opportunities!)

Athletes Name: \_\_\_\_\_  Male or  Female

Camp you are interested in attending: \_\_\_\_\_

Grade Entering: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ (used for confirmation purposes)

Medical Insurance Company and Policy #: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_