

Glacier Nordic Ski Team Scholarship Application

Jets, Prep, & Comp

Parent	t Name:F	Phone:
Name of scholarship applicant:		
Addres	ss:	·
City/State/Zip Code:		
Email:		
Which How m	nany years have you been involved in GNST programs? program are you requesting a scholarship for? nuch are you requesting in scholarship funds? e write a brief statement explaining your financial need:	
Do you as a parent agree (or pledge) to:		
2.	Encourage your child to participate in as many practices and ever Help keep GNST affordable for all families by supporting and voraces. Keep GNST informed during/after the season – please email how	lunteering at team fundraisers and
Signed	d: Da	te:
Please scan (or take a picture) and email or mail the scholarship application to:		

Glacier Nordic Ski Team
PO Box 403
Whitefish, MT 59937
glaciernordicskiteam@gmail.com