

Tucker Byl Memorial Ski Racing Scholarship Application

Please fill out the entire application. The questions should be answered by the child where appropriate, with parental help as needed.

Student's Name: _____

Birth date: _____ Current Grade: _____

Current School: _____

Parent(s) name: _____

Address: _____

City: _____

Zip Code: _____

Phone Number (1) _____ (2) _____

Skiing ability (list camps, lessons, years of experience, etc):

Why would you like to learn to ski race? _____

How did you hear about this scholarship? _____

PARENTS: Why would this scholarship be financially helpful to you?

Are you interested in help with: _____ HRT Race Fees _____ Mt. Holiday Season Pass

Submit to: Tucker Byl Memorial Ski Racing Scholarship, 4391 Paper Birch Lane,
Traverse City, MI 49686