NAME

ASPEN VALLEY SKI & SNOWBOARD CLUB

Parent Signature:

2024/2025 AVSC ASK SCHOLARSHIP APPLICATION

Please mail to: Meredith Elwell, 300 AVSC Drive, Aspen, CO 81611

Or send via email: scholarships@teamavsc.org

Questions? Contact: ASK Director, Meredith Elwell, melwell@teamavsc.org, 970-205-5161

SCHOLARSHIP DEADLINE - FRIDAY, OCTOBER 25, 2024 BY 5PM

Aspen Supports Kids participants (Snowarriors Snowmass, Snowarriors Buttermilk, All Mountain Express and Ridgerunners Highlands) are eligible for up to the total cost of program fees less \$100 deposit due at the time of registration. Scholarships are NOT available for the SnoBandits, Aspenauts, Bighorns, Powder Pandas or Wahoo Weekday programs. Funds are limited and distributed based on family income and the content of the parent explanatory letter. As a scholarship recipient, your child will be required to send two thank you letters to an AVSC Donor at the conclusion of the season.

| COMPLETED SCHOLARSHIP APPLICATION CHECKLIST | | | | | |
|---|--|--|---------------------------------|------------------------------|-------|
| | Register online, www.teamavsc.org Completed registration and \$100 per child deposit paid - If you do not receive a scholarship this payment will be applied towards program fees or refunded if your child withdraws due to financial circumstances. Scholarship Application Form - One form per family. 2023 Tax Returns – Two-parent households filing separate returns must attach 2023 tax returns from both individuals. All information is confidential. If you are unable to supply your 2023 Tax Return, please send in supporting documents for the questions below. IF YOU WOULD LIKE A LINK TO SECURELY UPLOAD YOUR TAX RETURN, PLEASE REACH OUT TO MEREDITH FOR THIS PROCESS. Explanatory Letter - On a separate sheet, please state why you are requesting a scholarship. Include comments | | | | DATE: |
| | | on any special circumstances influencing your financial position which AVSC should consider in the decision- | | | |
| | making process for your child. This should be written by the PARENT of the participant. | | | | |
| | FAMILY FINANCIAL II | NFORMATION *Below information is extrem | ely helpful in allowing AVSC to | best support each family. | |
| 1. | Parent One Income: | Daily / Weekly / BIMONTLY / Monthly | Amount: | Name of Employer: | |
| 2. | Parent Two Income: | Daily / Weekly / BIMONTLY / Monthly | Amount: | Name of Employer: | |
| 3. | Other Sources of Income: | Child Support / Alimony / Other | Amount: | | |
| 4. | Total Number of Household Me | embers (Adults & Children): | | | |
| | DO YOU QUALIFY FOR FREE AND REDUCED LUNCHES (circle yes or no) YES / NO | | | YES / NO | |
| | ARE YOU | J APPLYING FOR A BUDDY PROGRAM SCHOLA | ARSHIP (circle yes or no) | YES / NO | |
| Pa | rticipant's Name: | Snowarrior BM / Snow | arrior SM / Ridgerunners / | All Mountain Program Fee: \$ | j |
| Pa | rticipant's Name: | Snowarrior BM / Snow | arrior SM / Ridgerunners | / All Mountain Program Fee: | \$ |
| Pa | rticipant's Name: | Snowarrior BM / Snow | arrior SM / Ridgerunners | / All Mountain Program Fee: | \$ |
| | | | | | |

Date:

Print Name: