



For PEAK:
Date Received: _____
Date Approved: _____
Initials: _____

Team Peak - 2019 Scholarship Form

The goal of our scholarship program is to reduce cost or cover costs for families in need, and not turn away any athlete because of economic circumstances. Please fill out the following information to apply for a scholarship with Peak. Scholarship applications will be held in confidence.

Athlete Name: _____ Age: _____ Team PEAK Age Group: _____

Additional Athletes in family (Ages): _____

Parent/Guardian Information: Marital Status: Married Single Separated Divorced

Mother Name: _____ Father Name: _____

Address: _____ Address: _____

City, St, Zip: _____ City, St, Zip: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Financial Information:

Annual Family Gross Income from **all** sources: \$ _____ # of Dependents this supports: _____

Father's Occupation: _____ Employer: _____

Mother's Occupation: _____ Employer: _____

Scholarship Requested:

Full Team Peak Scholarship - \$ _____ Team Peak "Gear" Scholarship - \$ _____

Half Team Peak Scholarship - \$ _____ Workout Session Scholarship - \$ _____

Session: _____ Dates: _____

Total Scholarship Amount Requested: \$ _____

If other information/circumstances should be considered, please attach to this form. By signing below, I agree that all above information is accurate and true.

(SIGNATURE)

(PRINT NAME)

(DATE)

If mailing this form, please use PO Box 1732, Blowing Rock, NC 28605.

Team PEAK Mission

To support kids in becoming people of integrity who will lead their peers, chase their dreams, model responsibility for others, and do good in the world. We want to use the game of basketball as a vehicle to teach athletes how to develop strong character by working hard, investing in themselves and others, and pursuing goals through adversity.