

TENNIS CENTER

(718) 436-2500 phone
(718) 972-2690 fax
www.prospectpark.org/tennis

Junior Development Scholarship Application Form

Name _____

Date of Birth _____ School _____

Parent/Guardian Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Email _____

Work Phone _____ Cell Phone _____

Please attach most recent 1040 tax form. Please attach free/reduced-price school meals eligibility if applicable. Information will be kept confidential and will be reviewed only by the Scholarship Committee.

Deadline for application submission: Summer Sessions – May 31, 2010
Winter/Spring Sessions – October 16, 2010

Do you have other children enrolled in the program? Yes No
If yes, please list names _____

Program: Winter/Spring
 Summer Youth Program: number of weeks: _____
 Other _____

Program Hours: 1hr 1.5hr 2hr Tournament Training

Total Program Cost: _____ Percentage Requested: _____

Reason for Scholarship Request: _____

I certify that the above information is accurate.

Parent/Guardian Signature _____ Date _____