

Upper Limits Rock Gym 1304 W. Washington St. Bloomington, IL 61701 309-829-8255

2016-2017 Session 1 Upper Limits Youth Team Scholarship Application Form

The Upper Limits Youth Team Scholarship is awarded for one Bloomington area youth who seeks to enrich their lives through the physical and mental activity provided by rock climbing and the camaraderie developed in a team environment. This is a need based scholarship that is designated for families with a total household income less than \$50,000. Priority will be given to those in need of financial assistance.

Duration: 1 Session (4 months)

Selection Criteria

- Applicant must be between the ages of 7 and 17 at the time of application
- Applicant must be able to provide transportation for themselves to and from Upper Limits Rock Gym for practice and to competitions
- Applicants ages 7-12 must submit a 50-100 word essay explaining what climbing means to them and why they would like to participate on the team
- Applicants ages 13-17 must submit a 200-300 word essay explaining what climbing means to them and why they would like to participate on the team
- Applicants must be willing to commit to a full session of participation
- Academic report card from previous semester with at least a B average

Scholarship winners will be awarded:

- 4 month membership to Upper Limits Rock Gym during the climbing team season
- 4 month membership in the Youth Climbing Team season
- 4 month paid competition fees for local, regional, divisional, and national ABS and SCS competitions
- Upper Limits Team apparel, harness, and one pair of climbing shoes (if needed)

Applicants must complete the application on the following page and submit their application either in person, email, or mail to the following address:

Postal Mail:

Upper Limits Rock Gym 1304 W. Washington St. Bloomington, IL 61701

Email:

staff2@upperlimits.com

All applications and information submitted will be held in strict confidentiality. The application information will only be used for determining the qualifications for the Upper Limits Youth Climbing Team Scholarship.

Applications will be accepted through August 15th, 2016 for Session 1 and December 15th, 2016 for Session 2.

Scholarship winners will be notified **August 20th for Session 1 and December 20th for Session 2**. Team membership begins with the first week of practice and continues for the duration of the session.

Team members applying for the scholarship will have waived fees until after the winner has been announced due to time constraints.

Scholarship Retention

Attendance to all practices is a critical aspect of being part of a team. Continued benefits of the scholarship are contingent on maintaining 85% attendance of the team practice sessions.

Participants must maintain a B grade point average to retain scholarship and report cards must be submitted with application. Scholarship benefits will be revoked if grades start to fall.

Participants must maintain appropriate behavior and respect for their team members, coaches, and the Upper Limits facility, staff, and patrons.

Participants who do not maintain minimum attendance or continually display inappropriate behavior as deemed by Upper Limits staff, may be excused from the Upper Limits youth climbing team and have scholarship benefits revoked.

Upper Limits Youth Team Scholarship Application

Applicant First Name		Last Name	
Address			
City _		State	Zip code
Date of Birth _			
Parent (1) First Name		Last Name _	
Address			Or circle \rightarrow (Same as Child)
City _		State	Zip code
Date of Birth _	Email		
Occupation		Phone #	
Parent (2)			
		Last Name	
Address			Or circle \rightarrow (Same as Child)
City _		State	Zip code
Date of Birth _	Email		
Occupation		Phone #	
Household			
	nbers in household	Household cor	nbined annual income
	ted applicants for scholarship may		
Essay			
•	7-12 must submit a 50-100 word	essav explaining	g what climbing means to them and
•••••	l like to participate on the team.		
		rd essay explain	ing what climbing means to them and
why they would	l like to participate on the team.		
By signing, I agr	ee that the above information is c	orrect and true t	o the best of my knowledge
Signature of parent/legal guardian			Date
Printed name o	f parent/legal guardian		