

UNLIMITED PASS SCHOLARSHIP APPLICATION 2024

Please type or write your answers. (If you need a paper application they are available in the studio.)							
1.	Last Name:				First Name:		
2.	Mailing Address						
	Street:						
	City:		Stat	e:	Zip:		
3.	Daytime Teleph						
	Email Address:	:					
4.	Date of Birth:	Month	Day	Year	Gender:		
	Are you a vete	ran?		A Student?			
xperi	ence is not requ	ired to apply fo	r this pass, but	: if you have a	ny yoga experience please list it	here:	

Please list any challenges or obstacles you may be dealing with and let us know how you think yoga might support
you:
This scholarship is needs-based. Please briefly describe your financial and material circumstances to establish need.
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Check HereI understand that this is a year long unlimited pass and that if I am awarded the scholarship pass
I will be required to attend yoga a minimum of 4 times per month (more is encouraged) or the pass will be transferred
to another applicant,
STATEMENT OF ACCURACY FOR APPLICANTS
I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.
I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the scholarship program. (Awardees may waive photo due to unusual or compelling circumstances.)
program. (Awardeed may warve priote due to anabaar of componing circumstances.)
Oliveratives of a shallowship and broads
Signature of scholarship applicant: Date:
E Mail Angliaghiana Acc
<u>E-Mail Applications to:</u> shandylion1@gmail.com
<u>snandynon (@gman.com</u> Use the phrase "Scholarship application" in youur e-mail heading
ose the phrase Scholarship application in youth e-mail heading
REMINDER:
The deadline for this application to be received is:
May 15th.