



Biltmore Volleyball Scholarship Application



Biltmore Volleyball Academy Scholarship Policy: We will not discriminate against any family. However, we will only be able to offer scholarships to a limited number of families based on need, and most importantly on the amount of scholarship monies that are available. Private donations along with the budgeted monies of the club are the sole resources for these scholarships. **Those receiving scholarship money will be asked to volunteer for the club when needed, but are also required to by Gym Managers for the Jr. Hi Neighbor Volleyball Tournament on April 6 & 7, 2019.** You will only be eligible to receive a scholarship for two years. (Occasional exceptions are made.) **Those applying for a scholarship must submit a copy of their most recent tax returns along with their most recent pay stub.** **The deadline for application is November 1, 2018.** All applications should be sent to:

Amanda Simpkins
616 Walnut Valley Parkway
Arden, NC 28704
or emailed to BiltmoreVolleyball@gmail.com

Application Date: _____

Players Name: _____
Home Address: _____
Telephone: _____
School: _____
Grade: _____
Email address: _____

Fathers Name: _____
Occupation: _____
Employer: _____ Cell Phone: _____

Mothers Name: _____
Occupation: _____
Employer: _____ Cell Phone: _____

Best time to call _____
Best phone number to call _____ Parent Name _____

Since BVA does not offer full scholarships, how much can you afford to pay BVA on a monthly basis?

Names and ages of players who will be involved with Biltmore Volleyball Academy:

_____ DOB _____
_____ DOB _____

Names and ages of other children living at home:

Any other persons living in household:

Total amount of family income (please attach a copy of your 2017 Tax Returns or any other documentation for income purposes) _____

Household income from other sources: _____

Do you receive child support or alimony? ____ Yes ____ No

If yes, how much per month? _____

Does your family have the financial responsibility of paying child support or alimony? ____ Yes ____ No

If yes, please explain: _____

Is either parent enrolled in a college program? ____ Father ____ Mother

Name of school: _____

Anticipated date of graduation: _____

Yearly education costs that parent must pay: _____

I understand that I will be required to be a volleyball manager for the Jr Hi Neighbor Tournament in April. My job duties include: Attending the volleyball managers training meeting in March, contact facility & fill out gym checklist for the facility I am assigned to, get parents to sign up and help set up Gyms Friday afternoon/ evening, make sure gyms are torn down/ cleaned up on Sunday, Open gym at 7am on Saturday morning; make sure all equipment is ok for start at 8am. Work throughout the weekend at your assigned gym & update the wall charts & communicate with division manager.

Please sign here _____

In the space below, please give a brief summary of any special circumstances that have an impact upon your ability to meet monthly expenses. List any regular monthly expenses (rent, utilities, food, etc.). Feel free to attach another sheet of paper with documentation.

BVA respects the right of privacy and will not share any information with anyone other than the Executive Director, Assistant Director & the BVA Board. We trust you will not share any information regarding the rewarding of any financial assistance with any other parents or teammates. We do not expect any player receiving a scholarship to be treated differently than any other player. BVA does expect full participation in all practices, tournaments and any other club related activities, regardless of the financial commitment you have to the club.

By signing this Scholarship Application you are stating that all information you have provided is true and accurate. You are also agreeing that a stipulation of receiving financial assistance is that the remaining balance of your Club Dues and Uniform Fees are due and payable on a monthly basis. Failing to make scheduled payments will result in the forfeiture of all financial assistance and the entire balance of the Club Dues will become payable in order to continue to.

Parent Signature: _____ Date: _____