

Telluride Adaptive Sports Program  
2009 Summer Program  
Scholarship Application

NAME/STUDENT: \_\_\_\_\_

PARENT/GROUP/SPONSOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE H/W/C: \_\_\_\_\_

DISABILITY: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

WHAT ACTIVITIES ARE YOU INTERESTED IN?

- RAFTING    KAYAKING    JEEP TOURS    CYCLING    HIKING    FISHING
- ROCK CLIMBING    OVERNIGHT OUTINGS    OTHER (PLEASE DESCRIBE)

WHAT ACTIVITIES ARE YOU INTERESTED IN THIS SUMMER? *See summer schedule.*

PLEASE DESCRIBE CURRENT FINANCIAL SITUATION AND/OR NEEDS:

PLEASE INDICATE ABILITY TO PAY: We want to provide scholarships for as many students as possible therefore students or parents are asked to pay a minimum of \$15.00 for most single day activities. Activity fees will vary this summer - some minimums will be more and some things may be free! Please let us know if you would like to volunteer in exchange for services. Explain any extenuating financial circumstances that would keep you from participating!!

PROPOSED SCHEDULE FOR ACTIVITIES/LESSONS: Indicate the day/dates, # of activities or schedule.

SIGNATURE: Applicant/Parent/Sponsor \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ Date: \_\_\_\_\_

Courtney Stuecheli or designated TASP staff

- Please submit to TASP office 2 weeks prior to participation. Call 970-728-5010
- Mail: TASP, P.O. Box 2254 Telluride, CO. 81435   E - mail: [tasp@tellurideadaptivesports.org](mailto:tasp@tellurideadaptivesports.org)
- Deliver: TASP office in the Mountain Village at 113 Lost Creek Lane. Suite D (Blue Mesa Bldg)