

## **Scholarship Application**

NEHSA has limited funding available to help qualified applicants who wish to experience our program. All scholarship recipients are asked to pay a minimum financial contribution for all lessons if possible and have a fully paid yearly membership fee, individual membership \$45.00, family membership \$70.00.

For information regarding our Scholarship Guidelines, please <u>click here</u> to download the scholarship guidelines or speak with a NEHSA Staff member by calling 603.763.9158.

Please note that all NEHSA yearly <u>intake paperwork</u> must be up to date prior to the first scheduled lesson.

Date:		
Name:		
First	Last	
Age:	Date of Birth:	
Address:		
Street/City/State/Zip Code		
Phone:		
Home	Mobile	
Email:		

Parent or legal guardian if applicant is a minor:					
If n	ot a minor, please write "self"				
Tyl	pe of lessons requesting aid (cost to b	e cove	ered by scholarship)		
Ful	ll Day Lesson	Ha	lf Day Lesson		
	Winter: Rate: \$95.00 Summer: Rate: \$50.00		Winter: Rate: \$70.00 Summer: Rate: \$30.00		
Ful	ll Day Lesson Partial Scholarship	Ha	Half Day Lesson Partial Scholarship		
	Winter: Rate: \$65.00 Summer: Rate: \$20.00		Winter: Rate: \$40.00 Summer: Rate: \$20.00		
	I can pay				
Ple	ase describe your reason for request	ing sc	holarship assistance:		
isti cov	ng participants, who display an inte	erest i may b	e for individuals of all ages, both new and ex- n recreation and need financial assistance to e requested (i.e.: paycheck stub, government		
uno Spo			tion on this page is current and accurate. I ial and will be used by New England Healing		
Pri	nt Name		Signature		