



ALEX FORTUNE SCHOLARSHIP APPLICATION

Timberhill Tennis Club * 2775 NW 29th Street * Corvallis, OR 97330
(541)753-1043 * www.timberhilltennis.com

Name of applicant: _____

Home address: _____ Apt # _____ City _____ Zip _____

Mailing address (if different) _____

Email: _____ Phone: _____

LIST EVERYONE IN YOUR HOUSEHOLD WHO REQUESTS 50% SCHOLARSHIP ASSISTANCE, AND WHICH CLASS SESSIONS IT SHOULD BE APPLIED TO

First & Last Name	Gender	Date of Birth	Relationship	Class Session
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1.

2.

3.

Please provide just ONE of the following items to show that you qualify for the Alex Fortune Scholarship program

Do you have a child that receives free/reduced lunch within Corvallis School District?

Name of child: _____

Name of School: _____

Please initial here: _____

(This authorizes the district to provide verification of free/reduced lunch status)

--OR--

Do you have an Oregon Health Plan card that includes the name of one member of your household?

Please submit a copy of your card.

--OR--

Do you have proof of public assistance such as WIC, Oregon Trail (SNAP or TANF)?

Please submit a copy of your statement of benefits (NOT a copy of the card)

--OR--

Do you have a copy of your most recent paystub or the front page of your most recent tax return? Please submit a copy.

ALEX FORTUNE SCHOLARSHIP AGREEMENT
please read carefully and initial next to each line

- Initial_____ Scholarship funds are limited, and will be awarded seasonally on a first-come, first-served basis. Meeting eligibility qualifications does not guarantee receipt of the scholarship award.
- Initial_____ Scholarship funds cannot be shared. Unused funds cannot be rolled over.
- Initial_____ All information such as name, current mailing address, etc. must be filled in completely and accurately. Each application is carefully reviewed and approved or denied based on the information provided by you.
- Initial_____ Scholarship eligibility expires annually on August 15. Everyone is required to re-apply annually.
- Initial_____ You will be notified by email once your application has been processed. The application process can take up to 10 business days.
- Initial_____ To register for classes using scholarship funds as a form of payment, arrange registration directly with Hunter Lipscomb, Director of Tennis Operations at Timberhill Tennis Club. Scholarship funds may not be used toward Valley Tennis Academy fees.
- Initial_____ All refund requests must be approved by designated staff prior to receiving any refund.

I agree that the above information is true and complete. I understand that Timberhill Tennis Club staff may need to verify the information on my application and that misrepresenting information will result in denial of the requested Scholarship and may prohibit future eligibility in the Alex Fortune Scholarship program.

Signature

Today's Date

Please send application and materials to:

TTC ** attn: Fortune Scholarship ** 2775 NW 29th Street ** Corvallis, OR 97330
or by email to: hunter@timberhilltennis.com

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FOR OFFICE USE ONLY

Date application received:

Scholarship approved?

Date application reviewed:

If no, why?

Reviewed by staff (initial):

Scholarship #