

2018 SUMMER CAMP SCHOLARSHIP APPLICATION

The purpose of the USAF Summer Camp Scholarship Fund is to provide assistance to USAF members who may be financially restricted in their ability to attend camp. Regardless of rank, all USAF members (other than previous scholarship winners) who are current with their annual dues and have financial need, are eligible to submit this application. **10** scholarships are available this year.

Scholarships **ONLY** cover the Aikido portion of Camp Packages (full or ½ week). Scholarships are **NOT** available for Aikido-Only Day Participants. **Scholarship recipients are responsible for paying their travel, food and hotel expenses.** The **deadline** for application submissions is **April 30, 2018**. Scholarship recipients will be notified by **May 4, 2018**.

- If you are a scholarship recipient but have not purchased a Camp Package, you must register purchase a “Dinners Only” Camp Package for either full or ½ week by registering online at www.usafsummercamp.com. **NOTE: You must purchase your “Dinner Only” Camp Package no later than May 21, 2018 or your scholarship will be forfeited.**
- If you are a scholarship recipient and have previously purchased an “Aikido and Dinners” Camp Package for either full or ½ week, you will be refunded the difference between the “Aikido and Dinner” and “Dinners Only” rates.

For more information on Camp Packages and USAF discounted hotel rates and the hotel reservation process, go to www.usafsummercamp.com.

The fillable PDF Scholarship Application is located at www.usafaikidonews.com/summer-camp-2018. If possible, you can e-mail your completed application to Laura Pavlick @ laura@usaikifed.com. If you are mailing in your application, mail it to: **Laura Pavlick/USAF, 49 Maple Street, Litchfield, CT 06759.**

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Scholarships are intended for those who have financial need. Previous winners are not eligible for scholarships and should not apply. As a scholarship applicant, you must (i) be a USAF member and (ii) have paid your 2018 USAF dues. In addition, please have your instructor complete the section “For applicant’s Instructor” below.

Name: _____ Rank: _____ Age: _____

Address: _____ City: _____

State/Zip: _____ Country: _____

Phone: _____ E-mail address: _____

Dojo: _____

Applicant’s Signature _____

For Applicant’s Instructor: Please explain why you support your student’s scholarship application:

I, _____, have reviewed this application and confirm my student has paid his/her 2018 USAF dues.

Instructor’s Signature _____