## HAWAII KAI BOAT CLUB FOUNDATION 906 KOKO ISLE CIRCLE HONOLULU HI 96825

Email: helenavonsydow@gmail.com

## APPLICATION FOR FINANCIAL ASSISTANCE

Date of Requ	uest		
Name			
	Last Name	First Name	MI
Date of Birth	l	email	
Address		(	City
State	ZIP Code	Phone	
Yacht Club_		School	US Sailing #
Requesting I	Financial Assistance	for:	
		Name of Regatta	or Event attending

## BUDGET / FINANCIAL BREAKDOWN

Expenses	Funding Provided by	Amount
Airfare	\$ Parents	\$
Lodging	\$ Self	\$
Ground Transport	\$ Yacht Club	\$
Meals	\$ US Sailing	\$
Regatta Entry Fee	\$ Others	\$
Boat Charter Fees	\$	
Borrowed Boat insurance	\$	
Other Costs	\$	
	\$	
	\$	
Total	\$ Total	\$

TOTAL AMOUNT REQUESTS	ED FROM HKBCF \$
Have you requested or received fur	nding from other sources: YES / NO. If YES, please provide details:
Provide details of your preparation assistance:	for this event and why you should be considered for financial
SAILING INSTRUCTORS COMME Comments and endorsements from	NTS your club sailing instructor or high school sailing coach:
Signature:	Date:
I support my child's efforts to partici Hawaii Kai Boat Club Foundation. I	OVAL: (required if you are under 18) ipate in the above mentioned event and their request for funding from understand that if my child is successful in their application and that e event, I will refund to Hawaii Kai Boat Club Foundation the full is request.
Parent or Guardian Signature	Date
subsequently do not attend the eve the full amount of funding received will advise HKBCF in writing of the	equest is correct. I understand that if my application is successful and I on the or obtain other funding to cover my expenses, I will refund HKBCF from this application. On my return or upon completion of the event, I details of the activity and my finishing position. In addition, if or publication in club newsletters or other suitable venue to promote
Signature	Date