

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

HKBC SCHOLARSHIP APPLICATION

Student Name: _____
Parent Name: _____
Address: _____
Phone: _____
Email: _____

Name/Date of Class: _____
Class Session: _____
Are you a HKBC Member: _____
Membership Number: _____

HKBC FINANCIAL REQUEST

Why I love sailing at HKBC:

Why I deserve a scholarship from the HKBC Foundation:

Any additional comments you would like to share:

Notes:

Membership is not required to apply for a scholarship.

Scholarship will be paid directly to HKBC for quarterly class.

Qualified students with payment already made to HKBC will be reimbursed.

PARENTAL SUPPORT AND APPROVAL: (required if you are under 18)

I support my child's efforts to participate in the above mentioned event and their request for funding from Hawaii Kai Boat Club Foundation. I understand that if my child is successful in their application and that they subsequently do not attend the class, I will refund to Hawaii Kai Boat Club Foundation the full amount of funding received from this request.

Parent or Guardian Signature _____

Date _____

APPLICANT'S SIGNATURE

I certify that all information in this request is correct. I understand that if my application is successful and I subsequently do not attend the class, I will refund HKBCF the full amount of funding received from this application.

Signature _____

Date _____