

# Idaho Falls Babe Ruth / Cal Ripken Scholarship Form

This form will be used to assist the Idaho Falls Babe Ruth / Cal Ripken (IFBR/CR) Executive Board in awarding scholarship aid to players/families for the current IFBR/CR season. In order to be considered for a scholarship, you must complete all sections of the form and return the form to the Executive Board for approval. All scholarship requests/information will be treated as confidential by the IFBR/CR Executive Board.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Cell: \_\_\_\_\_

Explanation of request for scholarship aid:

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Children Participating in IFBR/CR

Child's Name (1) \_\_\_\_\_ Age: \_\_\_\_\_

Child's Name (2) \_\_\_\_\_ Age: \_\_\_\_\_

Child's Name (3) \_\_\_\_\_ Age: \_\_\_\_\_

Authorizations and Acknowledgments: (Read before signing)

By my signature below I certify that all of the information on this form is complete and correct. I understand that purposely giving false or misleading information may result in the forfeiture of scholarship aid.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_