JERRY FOOTE SCHOLARSHIP FUND

Application

LAST NAME: _____ FIRST NAME: _____ MI _____

RESIDENCE: _____

CITY: _____ ZIP CODE: _____

MAILING ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

NAME OF MOTHER/GUARDIAN 1: _____

NAME OF FATHER/GUARDIAN 2: _____

SCHOOL ATTENDING: _____

SCHOOL'S CITY and COUNTY: _____

YEAR IN SCHOOL _____ AGE: _____

Applicants must be high school sophomore, junior, or senior, or be a college student under the age of 25.

I AM A RESIDENT OF NEVADA COUNTY, CALIFORNIA: YES _____ NO _____

Applicants must be play a brass, woodwind, or percussion instrument. I PLAY THESE INSTRUMENT(S): _____

_____

I have completed this application and, to the best of my knowledge, all information contained herein is true and accurate. I understand and agree to audition with the Jerry Foote Scholarship Committee. If I am awarded a scholarship, I agree to perform with the Nevada County Concert Band (either as a soloist or in an ensemble) within a year from the date of the award. I will submit a "WRITTEN" thank you to NCCB in a timely manner. My signature releases the Nevada County Concert Band and its employees/members from any and all liability arising from or related to the scholarship process).

STUDENT SIGNATURE: _____

DATE _____

I consent to be recognized for any grants or scholarships awarded me. YES _____ NO _____

PARENT/GUARDIAN SIGNATURE: _____

DATE _____

NEVADA COUNTY CONCERT BAND,
P.O. BOX 1444, NEVADA CITY, CA 95959