

TEWKSBURY GIRLS' BASKETBALL LEAGUE
SCHOLARSHIP APPLICATION – 2010

PLEASE TYPE OR PRINT CLEARLY

Applicant's Full Name: (Please Print) _____

Address: _____
Street City State

Telephone: (____) ____-____ Parent/Guardian Name: _____

Tewksbury Girls' Basketball Program Participation

1. How many years in each league did you play in. TGBL/Teams played on (if known):

Clinic ___ yrs Jr. ___ yrs Intermediate ___ yrs Senior ___ yrs Travel ___ yrs
Teams: _____

2. Did you volunteer your time for TGBL? (Circle) Y / N

If yes, please list specifically what you did and how many years you volunteered (list years):

3. Do you have any relatives who have, or are now, a volunteer in the Tewksbury Girls' Basketball League (coach, assistant coach, scorekeeper, board member, other)?

Relative(s) Name	Volunteer Position(s)	List all Years
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4. **List** High School Activities: (clubs, organizations, sports, etc.) _____

5. **List** Volunteer activities **outside** of High School: _____

6. GPA: _____ High School: _____ College Choice: _____

Applications must be postmarked by April 16, 2010

**Mail to: TGBL
PO Box 232
Tewksbury MA 01876**

Applicant Signature

Date