

Junior Scholarship Program Application

**Greater Madison Tennis Association
Attn: GMTA Junior Grant Program
7821 Stratton Way
Madison, WI 53719**

As part of the overall mission of the GMTA, the Association seeks to support junior tennis players who might otherwise be unable to pursue tennis programming suitable for their level of play. This support is made available strictly on a need-base only. Players of Pre-High School age or younger in need of such support should complete the following preliminary application. All grant decisions are subject to approval by the Board of the GMTA or a committee so appointed. This program is designed to provide support for specific junior tennis activity, and not for broader uses such as school tuition. Grant funds may be subject to proof of participation in a free and reduced school meal program.

Name: _____ Gender: _____ Date of Birth: _____

Address: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Name of Parent or Guardian: _____ Phone: _____

What Program or Activity are you seeking support for? _____

Describe Nature of Need (Note all information supplied is confidential and will be used only in the processing of this application.) _____

(Continue on reverse, if necessary)

Briefly outline your previous tennis background, including programs or teams that you've experienced: _____
