

ALLEGAN
5-DAY
HORSE
CLINIC



Allegan Five Day Horse Clinic

Scholarship Application

A fund has been established to help those in true need pay for part or all of their registration to clinic. Funds are limited. Not all applicants will necessarily receive assistance. The clinic committee will review all submissions and assistance will be awarded based on available funds, financial need, and answers to the following questions. To donate to this fund please contact Kerisa Desimone at allegan5day@gmail.com

To be eligible for financial assistance from the Allegan County 4-H Horse Five Day Clinic you must:

1. Be a 4-H member in good standing.
2. Complete this application and submit with your clinic registration

Application must be submitted by: May 19th, 2024

Email to: allegan5day@gmail.com

Selection Process: The clinic committee will review all submissions and assistance will be awarded to based on available funds, financial need, and answers to the following questions.

Name: _____

Address: _____ City _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

of years in 4-H _____ Is this your first time attending Five Day Clinic? ___ Yes ___ No

Are you able to be attend all the days of clinic and have 100% attendance in the classes you are receiving aid for? _____

Have you received a scholarship in the past? ___ Yes ___ No

Please explain the need for financial support? _____

To be completed by the youth:

Please introduce yourself to the clinic committee. Tell us about yourself and your horse. What do you like about your horse? Anything else you want the committee to know?

What do you hope to gain from this experience?

How will you share what you learn with other members? _____

If you are awarded a scholarship are you willing to volunteer at clinic helping instructors set up and tear down between classes?

_____Yes _____No

Parent signature: _____ Date: _____

Youth name/signature: _____ Date: _____

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