

## YOUTH SCHOLARSHIP APPLICATION

## Warrior Running Camp: July 24 through July 29, 2016

Please print legibly in ink			
Name of Applicant:			
Address:			
Phone Number: Email Address:			
Are you or your family a current member of Palm Beach Roadrunners?	Yes	No	
Name of Emergency Contact:	_ Phone Number	::	
Gender (M/F) Age: Name of School:			
Did you compete during the 2015-2016 school year on the cross countr	y or track team?	Yes No	Both
Current miles per week: Current 5K time:			
5K PR: Race Name:*Please provide supportive documentation	Date of Rac	ce:	
Would you be able to commit to volunteer at a Palm Beach Roadrunner	rs event?	Yes	No
Have you been granted a PBRR Warrior Camp scholarship in the past?	Yes When		No
ESSAY: Please share on a separate piece of paper your run you should be selected for the Warrior Running Camp.	ning experien	ce and why yo	u feel
If you are selected to attend the Warrior Running Camp, you will be re PBRR for 2016 2) share your experience with PBRR and 3) volunteer at	-	-	the
I know that running is a potentially hazardous activity. I assume all risk associated win with other participants, running injuries and injuries resulting from physical limitation agree not to sue the Palm Beach Roadrunners and Warrior Running Camp and their office arising from my participation in the Warrior Running Camp.	ns and disabilities. I	waive, release, disc	charge and
	Date:		
(Signature of student)			
	Date: _		
(Signature of parent, if student is under 18)			

Please forward your application and essay by deadline Thursday, May 26, 2016 to:
Dianne Lavado, 14341 Evelyn Drive, Palm Beach Gardens, FL 33410
or scan and email to: media@palmbeachroadrunners.com