



APPLICATION FOR FINANCIAL AID

Purpose:

The Eastern Sierra Nordic Ski Association (ESNSA) is a recognized, Non-Profit 501(C)(3) Organization. The mission of ESNSA is to promote cross-country skiing and biathlon in the Eastern Sierra while encouraging the development of responsible and self-motivated skiers through providing coaching and support required to assist each athlete to ski and race at his or her best.

As a part of its mission, ESNSA provides financial aid to athletes who would otherwise be unable to participate on the Nordic Programs. ESNSA is funded by the contributions of its membership as well as fundraising efforts it makes throughout the year. Funds raised by ESNSA are then put back into the Nordic Community through these scholarships. Funds that are not needed for aid to athletes are thereafter used to purchase much needed supplies for the Nordic Programs such as wax, tools and uniforms.

ESNSA is not a part of nor affiliated with the Mammoth Mountain Ski Area or the Mammoth Mountain Community Foundation; we are an independent organization that relies solely on the contributions of its members and other private fundraising efforts. ESNSA does not gather or review your personal financial information to determine if an athlete's need is genuine. It is our philosophy that no junior athlete should be unable to participate for a lack of funds. We are relying on your good faith certification below that your need is genuine. Accordingly, we ask that you consider the foregoing in requesting these funds and we strongly encourage you to assist us in our fundraising efforts so that we may make ESNSA a sustainable, positive force in our community.



Application:

I hereby request that the following participant be considered for financial aid from the ESN SA to make it possible for him/her to participate in the Nordic Program specified below in Mammoth Lakes, California.

Name of Participant: _____

Age: _____

Name of Program / Event for which aid is requested: _____

Cost of Program: \$ _____

Amount that participant/parents can pay: \$ _____

Amount of aid requested: \$ _____

Requesting party's commitment to ESN SA:

The participant and his/her family are willing, in consideration of the aid provided, to assist ESN SA in the following ways throughout the year (check all that apply):

- Volunteer to assist ESN SA in fundraising events.
- Provide clerical assistance to ESN SA, such as data entry or organizing events.
- Assist ESN SA by volunteering at race events.

Certification:

I certify that, but for the assistance I am requesting from ESN SA, the Athlete referenced above will either be unable to participate in the program for which I am seeking assistance or the participation without the requested aid would cause financial burden on our family.

Signed: _____