



PO Box 296 ● Downsville, NY 13755 ● www.DVRRSnowmobileClub.com ● 607-363-7814

Delaware Valley Ridge Riders Snowmobile Club Scholarship Application

Name of Applicant (First/Last): _____
 Family/Personal Club Membership Name: _____
 Mailing Address: _____
 City: _____ County: _____ State: _____ Zip Code: _____
 Phone Number: _____
 Email Address: _____
 Date of Birth: _____ NYSSA ID Number: _____
 High School Attending: _____
 Graduation Date: _____
 College/Trade School Attending: _____
 Date of College/Trade School Attendance: _____
 College Major/Trade School Study: _____

The Delaware Valley Ridge Riders will be selecting a member (or someone part of a family membership) of our snowmobile club who will be attending college to receive a scholarship.

Eligibility:

- Completed/Signed Application
- One (1) Signed Reference Letter from a non-family club member
- One (1) Signed Reference Letter from a Teacher/Administrator
- An essay of at least 250 words about one of the following:
 - In your opinion, what do snowmobile clubs need to do in order to engage and encourage young men/women to become active participants in their club?
 - How would you advocate for/spread awareness about snowmobiling laws and safety regulations throughout your local community?
 - What is the importance of maintaining a healthy relationship with local landowners throughout a snowmobile club's trail system?

All eligibility requirements must be completed and submitted by Friday, May 31, 2019 to:
 ****Entries received after 05/31/2019 will not be considered for scholarship selection. ***

Delaware Valley Ridge Riders Snowmobile Club
 Attn: Scholarship Committee
 PO Box 296
 Downsville, NY 13755

By signing this application, I certify that I am the applicant for the DVRR Club Scholarship, that I have completed all requirements to be eligible for selection for this scholarship, and that I allow the DVRR Club to use my name, information, and essay in future promotions/advertisements for their non-profit Snowmobile Club.

Signature: _____ Date: _____

Parent/Guardian Signature (If Under 18 y/o): _____ Date: _____