

**Cross Point Emmaus  
Board Scholarship  
Application - PILGRIM**

Walk Number # \_\_\_\_\_ Men's \_\_\_\_\_ Women's \_\_\_\_\_

Candidate's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Sponsor's Name \_\_\_\_\_

Sponsor's Phone \_\_\_\_\_

Candidate's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Scholarship Rules:**

1. A deposit equal of 50% of the current fee (\$125) must be paid to be eligible.
2. Scholarships are limited to funds available.
3. Only ONE scholarship may be granted in a 12 month period.

**\*For Registrar's Use Only\***

Deposit Paid: \$ \_\_\_\_\_

Date Paid: \_\_\_\_\_

Amount of Scholarship \$ \_\_\_\_\_

Registrar's Signature \_\_\_\_\_

Date \_\_\_\_\_