



2016 Lori Moran-Ditchkus Memorial Skating Fund Application



Skater's name _____ Age _____

Address _____

City _____ State _____ Zip _____

Highest Tests Passed _____

Hours per week on-ice training (or # of sessions) _____

Hours per week off-ice training (includes dance) _____

Number of lessons per week _____

Primary Coach/Secondary Coach _____

Attends school at _____

Grade average this year _____

Competition results _____

Previous awards, scholarships or sponsors _____

Volunteer activities and hours in support of IHNJFSC (July 1, 2015 – June 30, 2016) _____

Goals for this year _____

Goals for the future _____

Coach's statement (Must be completed by your primary coach. Use a separate sheet of paper if necessary.)

Coach's signature _____ Date _____

Scholarship Applicant:

I have answered truthfully and to the best of my ability. I understand that if any statements I have made are proven to be false, my application to receive funds from the Lori Moran-Ditchkus Fund will be denied.

Signed _____ Date _____

Signature of Ice House of New Jersey Figure Skating Club board member:

I, _____, confirm that _____ is a member in good standing of the Ice House of NJ FSC and that all of the above mentioned statements are true.

Signed _____ Date _____

Please mail application to:

Maria Morin
72 Overpeck Avenue
Ridgefield Park, NJ 07660

Must be post marked by August 15, 2016. Late applications will not be considered. If leaving the application in the Club box, please notify Maria Morin. THANK YOU!