



# Sports & Activities Scholarships



Gracie Snider was an amazingly determined young lady with a heart of gold who loved to play sports. Sadly, in the Spring of 2014, Gracie's life was taken in a car accident on the way home from a soccer match. As the proud parents of this wonderful little sweetheart, we knew that we had to do something special to honor Gracie and give back to our loving community. The Play for Gracie Foundation was started with the mission of helping kids afford opportunities to play sports and participate in activities they love. We know sweet Gracie is looking down and loving every minute of her living legacy.

Sports & Activities Scholarships  
will be awarded annually to amazing kids  
in need, grades K-12, in our community  
who aspire to play sports and  
participate in activities they love!

We invite you to visit [www.playforgraciefoundation.org](http://www.playforgraciefoundation.org) to learn more about our mission and to check out the amazing contributions that have benefited individuals and groups in our community. If you have questions regarding the Play for Gracie Foundation, scholarship opportunities or financial eligibility, please contact us at [info@playforgraciefoundation.org](mailto:info@playforgraciefoundation.org).

Revised: 4/16/18



# Scholarship Application

Each applicant is required to:

- 1) Submit a brief letter (**written by child NOT parent/guardian**) along with their application. The topic of the letter should be: "The Impact of Sports or Extracurricular Activities on My Life".
- 2) Attach proof of eligibility for free and reduced lunch program to validate financial need. \*

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

How did you hear about our organization? \_\_\_\_\_

**PLEASE NOTE:** If you are selected, the Play for Gracie Foundation will pay your scholarship award directly to the organization of your choice.

Amount Requested: \_\_\_\_\_ (mandatory, cannot be left blank!)

Purpose of Request (i.e., registration, equipment, etc.): \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

By signing this application, you are giving permission for your child to pursue a Play for Gracie Sports & Activities Scholarship and verifying that the beneficiary of this award meets financial need guidelines. Income verification may be requested. You also agree to give permission to the Play for Gracie Foundation to share your child's letter on the Foundation's website and other social media. All additional information will not be shared.

Revised: 7/2/18

**\* Send: 1) Application with Letter and 2) Proof of Eligibility to:**  
Play for Gracie Foundation; ATTN: Scholarship; PO Box 31551; Spokane, WA 99223



# Community Request

Name of Group: \_\_\_\_\_ Non-profit  Yes  No

Name of Contact Person (please print): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about our organization? \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Purpose of Request : \_\_\_\_\_

Please state how this award will impact/benefit your organization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

*By signing this request, you agree to give permission to the Play for Gracie Foundation to share your group's purpose of request /impact statement on the Foundation's website and other social media. All additional information will not be shared.*

Revised: 7/2/18

**Send Request to:**  
Play for Gracie Foundation  
ATTN: Scholarship  
PO Box 31551  
Spokane, WA 99223