

ASOTIN FAIR BOOSTERS

4-H & FFA Scholarship Request Form

Name: _____

Name, date and location of event you wish to attend: _____

Cost of event: _____ Amount requested _____

What are your goals from attending this event? _____

How will your experience help your future? _____

How will you use this experience & skills you learned when you return? _____

Will you agree to come to a Boosters meeting to tell us about your experience? _____

Will you be willing to volunteer hours with the Boosters at a future fundraising event? _____

Signature & date: _____

Please mail request at least 30 days before event to:

Asotin Fair Boosters
Po Box 571
Asotin Wa. 99402