2010 Rocky Mountain Baseball School

Scholarship Application Form

Name: _____ Date: _____

Address: _____

City/Province/Postal Code: _____

Phone: _____ Email: _____

Camp in which you are participating: Camp 1 Camp 2 Camp 3

What is your favorite part of playing Baseball?
What is your proudest Baseball moment?
Explain why you want to be a part of and what you wish to learn at the Rocky Mountain Baseball Camp?

League or Coach Reference

Name:_____ League:_____ Phone:_____

_____ _____ _____ _____

Athlete's Signature Date Parent/Guardian's Signature Date