Application Number

JAMIE HILL & TAMMY-LYNN POWERS MEMORIAL FOUNDATION
2009 DANCE SCHOLARSHIP APPLICATION

Last Name: _____

First Name: _____

Street Address_____

City: _____ Postal Code: _____ Phone Number: (___)_____

Age (as of September, 1 2009): _____ Years of Experience since age 6:_____

Email Address: _____

Dance Discipline: ☐ TAP ☐ JAZZ ☐ BALLET ☐ OTHER: _____

Studio / Performing Arts School Name:_____

_____

ADJUDICATOR USE ONLY:

JAIMIE HILL & TAMMY-LYNN POWERS MEMORIAL FOUNDATION
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