



2. Names of teams and/or organizations of which Applicant is a member:
3. Names of sponsors, businesses or charitable organizations from which Applicant receives grants or financial support:
4. Is Applicant pre-qualified for USASA Nationals: **Yes**    **No**
5. Please include your current National Rankings:  

Overall	SS	HP	BX	GS	SL
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6. Please provide an explanation to the USASA Foundation as to why financial assistance is necessary for the Applicant to participate at Nationals (attach additional sheets if necessary):
7. Please provide a proposed budget setting forth the expenses that the Applicant expects to incur to attend and participate in USASA Nationals if the Applicant qualifies (attach additional sheets if necessary).
8. Please include a letter of reference from a coach, teacher and/or series director in support of the Applicant's request for Nationals assistance.

I, \_\_\_\_\_, do attest that the information contained in this application and in any attachments made as part of this application are true and correct to the best of my knowledge.

Signature of Applicant:

Mia Bibolet

Date:

2-28-14

Signature of Parent or Guardian  
(if Applicant is under 18 years of age):

Ann Bibolet

Date:

2-28-14



## 2014 National Assistance Award Application

The National Assistance Award will be granted to select individuals who have qualified for the 2014 annual National Championships and who demonstrate significant financial need. Past performance along with current National and Regional Rankings will also be considered. Awards will be issued in the form of a check to the address provided in increments of \$500. Awards will not be made public, and all Award recipients will receive an email notification on or around March 15, 2014.

Please complete this application and submit to the USASA Foundation Board via email at [usasafoundation@gmail.com](mailto:usasafoundation@gmail.com), subject NAA Application, by March 1, 2014.

### Applicant Information

**Name:**

**Snowboard or Ski:**

**Birthdate:**

**Address:**

**Telephone #:**

**Email:**

**Parent or Legal Guardian Information (all communication will go to parents if applicant is under 18 yrs old)**

**Name:**

**Address:**

**Telephone #:**

**Email:**

### Applicant Qualifications

1. Name of USASA Series and Series Director in which Applicant competes: