FOUNDATION			
junior shaggers			
funct shuggers			
P.O. Box 4501 • North Myrtle Beach, SC 29597			
APPLICATION FOR FINANCIAL ASSISTANCE			
	JUNIOR INFO	DRMATION	Age at Time of Event:
Name:			
Application Date:	Event Date:	Event:	
Individual Application Family Application			
Enter Additional Family Members Requesting Assistance and Age at Time of Event Below			
Additional Name:			Age at Time of Event:
Additional Name:			Age at Time of Event:
Assistance Requested: Food Travel Lodging Entry Fee # Days Attending the Event			
Have you applied for financial assistance from any other organization to attend this event? \Box Yes \Box No If yes, what amount do you expect to receive?			
Are you receiving financial assistance from any other organization, group, individual, team or fund raiser to attend this event? 🗌 Yes 🔹 No			
If Yes, what amount do you expect to receive? \$			
Are you sharing the cost of travel and/or lodging with another junior or family? Yes No			
I am sharing the cost of 🗌 Travel 🔲 Lodging			
Indicate activities in which you will participate at this event? 🗌 Attend Shag Workshops			
🗌 Teach Shag Workshops 🔲 Social Shag Dancing 🔲 Individual Shag Competition 🔲 Team Shag Competition			
PARENT OR GUARDIAN INFORMATION			
Parent/Guardian Name:			
Mailing Address:			
City: Phone:	Email	State:	ZIP Code:
By signing this application you certify you are the parent/guardian of the junior(s) listed above, you have read and understand the rules and regulations on the ETFJS web site, all information is correct and the junior(s) require financial assistance in order to attend the event.			
SIGNATURE OF PARENT/GUARDIAN			ATE
Revised 12/28/16 Applications must be received by the Foundation by the date posted on the ETFJS web site. Applications received after the due date will be returned for correction and reapplication.			

Pease refer to our web site for complete requirements for applicants, for their parents, and for events.

www.ellentaylorfoundation.org