



2020 JUNIOR MEMBER SCHOLARSHIP APPLICATION

This form is intended to provide background information to members of the selection committee who may not be acquainted with you. Please complete the form and attach additional sheets if there is insufficient space to completely answer a question.

Personal Information:

Full Name: _____ Date of Birth: _____

Parents'/Guardians' Names: _____

Addresses: _____ Landline: _____

City: _____ State: _____ Zip: _____ County: _____

Cell Phone: _____ Email: _____

Educational & Extracurricular Activities:

High School: _____ Year of Graduation: _____

Activity: _____ Position/Title: _____ From: _____ To: _____

Activity: _____ Position/Title: _____ From: _____ To: _____

Activity: _____ Position/Title: _____ From: _____ To: _____

Activity: _____ Position/Title: _____ From: _____ To: _____

Volunteer Experience:

Organization: _____ Position/Title: _____ From: _____ To: _____

Organization: _____ Position/Title: _____ From: _____ To: _____

Organization: _____ Position/Title: _____ From: _____ To: _____

Organization: _____ Position/Title: _____ From: _____ To: _____

Golf Experience:

GHIN Number: _____ Past five (5) tournament scores: _____

Have you been a member of a golf team or league? Yes No

Team/League: _____ From: _____ To: _____

Team/League: _____ From: _____ To: _____

List areas in which you have special knowledge or expertise:

By signing this application, I certify that the above information is true, correct, and complete. Irondequoit Country Club has my permission to publicize my scholarship award if chosen as the recipient.

Signature: _____ Date: _____