

**2020 SHJA CAROL WINDHAM SCHOLARSHIP APPLICATION**

**Applicant Name** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Home/Business \_\_\_\_\_

Email \_\_\_\_\_

Are you a SHJA member: Yes \_\_\_ No \_\_\_

Date of Birth \_\_\_\_\_

Age as of March 1<sup>st</sup> 2020 \_\_\_\_\_

Trainer- \_\_\_\_\_

Nominee Parents' Names (if nominee is under 18) \_\_\_\_\_

Parent's Phone \_\_\_\_\_

Parent's Email \_\_\_\_\_

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**PLEASE INCLUDE WITH THIS FORM:**

- 1) \$15 application fee- cash or checks made payable to SHJA  
\*please indicate on the check that it is for the 2020 scholarship application

**Submit completed information no later than April 1, 2020 to:**

EMAIL- southernHJassoc@gmail.com

MAIL- SHJA

Attn: Carol Windham Scholarship

P.O. Box 14363

Tallahassee, FL 32317

