

**LUTHERAN BASKETBALL ASSOCIATION OF AMERICA  
SCHOLARSHIP APPLICATION FORM**

CHURCH/SCHOOL NAME

\_\_\_\_\_

Address

\_\_\_\_\_

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

\_\_\_\_\_

Telephone (including Area Code) \_\_\_\_\_

Fax Number (including Area Code) \_\_\_\_\_

Pastor/Principal

\_\_\_\_\_

Coach

\_\_\_\_\_

Contact Person

\_\_\_\_\_

Address (If different from above)

\_\_\_\_\_

Home Telephone

\_\_\_\_\_

Number of Players \_\_\_\_\_ Coaches \_\_\_\_\_

Total cost per participating individual \_\_\_\_\_

Total members/students in your church/school \_\_\_\_\_

Approximate annual church/school total budget \_\_\_\_\_

Approximate annual athletic budget \_\_\_\_\_

What is your means of travel transportation

\_\_\_\_\_

\_\_\_\_\_

Approximate miles from church/school to Valparaiso (Round Trip) \_\_\_\_\_

Total amount of scholarship funds requested \_\_\_\_\_

How will you use or distribute the scholarship funds for the above participants? \_\_\_\_\_

\_\_\_\_\_

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List ways in which funds will be raised for the trip other than funds from the LBAA.  
(Types of funds raisers, church/school funding, family, donations, etc.) \_\_\_\_\_  
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*On behalf of the applying team, we do hereby certify that the submitted application information is true and accurate. We understand that we may be asked to verify or substantiate our expenditures in full. We further understand that failure to comply with above stated use of the scholarship funds might jeopardize future participation in the National Lutheran Basketball Tournament. It is also understood all decisions by the LBAA will be made with the best interest of all teams involved in the national tournament and all decisions by the Board of Directors is final.*

Filer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Day Telephone \_\_\_\_\_ Evening Telephone \_\_\_\_\_

Pastor's/Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

Day Telephone \_\_\_\_\_ Evening Telephone \_\_\_\_\_

Application must be in the hands of the person listed below by February 15, 2008.

Send form to:

**Mr. James Wilson, Jr.**  
**Treasurer, LBAA**  
**1961 Dougherty Ferry**  
**Kirkwood, MO 63122**

THE LBAA RESERVES THE RIGHT TO PLACE A TEAM  
THAT RECEIVES A SCHOLARSHIP IN THE HOTEL OF  
THEIR CHOOSING.