



# Race Scholarship Application Form

National Interscholastic Cycling Association  
2414 6<sup>th</sup> Street  
Berkeley, CA 94710  
(510) 524-5464  
Fax 510-779-5597  
[www.nationalmtb.org](http://www.nationalmtb.org)

We are committed to making our races accessible to everyone, regardless of their financial situation. Please complete the following information, and send to your League Director. They will review your application and get back to you as soon as possible about the level of scholarship they are able to offer to you. Please *do not* send to the NICA office.

Parent's Name(s):		
Student's Name:	Age:	School:
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	
Parent E-mail:		

In the space below, please describe your need for financial support for your daughter/son to participate in a NICA High School Cycling race/camp/event. Please use the back of this sheet if more space is needed.

### Sliding Scale

*Due to the limited nature of our scholarship funds, we rarely give full scholarships but ask that families pay what they can on a sliding scale.* Please indicate below what you are able to pay per race and/or for the series.

**I am able to pay \$ \_\_\_\_\_ per Race**      Please send this form to your League Director.  
**I am able to pay \$ \_\_\_\_\_ for Series**  
**I am able to pay \$ \_\_\_\_\_ for Camp/Summit**  
**I am able to pay \$ \_\_\_\_\_ for the Event**