

## APPLICATION FOR BCHJA EDUCATION SCHOLARSHIP - 2009

BCHJA is providing scholarships for Athlete Education, based on the 2009 final standings in specific categories. Winners must complete this form and submit it at least two weeks in advance of the clinic (unless clinic was before January 2010) and no later than November 30, 2010. Have the clinician sign your approved application to verify your attendance at the clinic, and return to Fran McAvity. The scholarship amount will then be forwarded directly to each applicant. NB. Clinics must be a minimum full two day riding/education clinic/seminar.

**\$200.00 will be made available towards the clinic (one only) of your choice in 2010. Available for the top three (provincial standings 2009) in the following divisions:**

### **Jumpers:**

0.90m Junior Jumpers: Meghan MacDonald, Erin Wylie, Maeve Scarborough

0.90m Amateur Jumpers: Laura Forsythe, Karen Evans, Helen Leslie

1.00m Junior Jumpers (section A): Drew Harkness, Karissa Hill, Desa Olic

1.00m Junior Jumpers (section B): Verity Stow, Jessica Lovig, Sasha Lewis

1.00m Amateur Jumpers: Kimberley Mittelsteadt, Andrea Naka, Susan Latiff

### **Hunters:**

Pony Hunters: Leah Burns, Hannah Green, (Robyn Gopaul, Maria Cooke - tied for 3<sup>rd</sup>)

Adult Amateur Hunters: Aimee Mercier, Susan Lund, Ann Lindwall

Children's Hunters: Micara Muir, Haley Stradling, Michelle Harvey

Modified child/Adult Hunters: Allie Lemoine, Elizabeth Funk, Ellen Brown

Pre-Child Hunters: Tess Hillier, Hillary Brydon, Jamie Gartner

Pre-Adult Hunters: Stephanie Fromberg, Lisa Poirier, Jane Mastin

**\$300.00 will be made available towards the clinic (one only) of your choice in 2010. Available to the top four in the BC Mini-Medal Final 2009:**

CET Mini Medal Final: Amanda Brook, Blaire Larsen, Malena Findler, Kimberly van Dongen

Effective date of Scholarship: 23/09/2009	Expiry date of Scholarship: 31/12/2010
Submission Date:	BCHJA #
NAME:	
ADDRESS:	
PHONE#	E-MAIL:
TRAINER/BARN:	
CLINICIAN:	
CLINICIAN SIGNATURE: (required)	
DATE AND VENUE OF CLINIC:	

SIGNATURE OF CLINICAN IS REQUIRED FOR PAYMENT

Fax, scan/e-mail completed form to: Fran McAvity 604 261-2240 or fran@gunold.ca