



## MEMBER FINANCIAL ASSISTANCE

**Cochran's Ski Club Member Financial Assistance provides funds to qualified Ski Club member family applicants to offset the costs of training and racing.**

### ELIGIBILITY

This financial assistance is available to racers who will be U12, U14, U16 and U19 members of Cochran's Ski Club in the upcoming season. **Preference may be given to athletes who have been a member of Cochran's Ski Club in a prior season.**

We do not require applicants to prove financial need. Asking is enough. Applicants should note that we cannot provide support to everyone who asks.

Awards of Member Financial Assistance will not be connected with race results, past or potential.

**The Ski Club area pass (\$295 + tax = \$312.70) may be waived by Cochran's Ski Area whether or not you are applying for financial assistance.** If you are applying for financial assistance, your Area pass cost will automatically be waived. If you are not applying here but would like the pass cost waived, please check the box on your Ski Club registration.

### CONFIDENTIALITY

Applications may be reviewed and qualified by a committee selected by the Board. Applicants' names will not appear to the committee. Recipients will not be identified publicly by the Board, though the total dollar amount awarded in each season may be shared with our community.

### PROCESS

Complete this application and mail it to Cochran's Ski Club to be received by **October 9 and awards made by October 15. Applications received after October 9 may be awarded on a rolling basis while funds are available. Ski Club late fees for applicants will be waived. Please note late fees for renewing U.S. Ski & Snowboard and VARA memberships apply after October 15.** Full program details are available upon request.

Mail to: **Cochran's Ski Club  
ATTN: MFA  
P.O. Box 104  
Richmond, VT 05477**

Payment of awards will be made as a credit toward Ski Club membership fees. Financial assistance awards may not be enough to cover the full Ski Club membership fees.

The application is set up so that a parent may fill it out; if the family chooses the athlete does not have to be aware of the application.



## MEMBER FINANCIAL ASSISTANCE APPLICATION

Racer's Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

If we have any questions about this application, whom should we contact, and how?

Name: \_\_\_\_\_

MAIL TO:  
Cochran's Ski Club  
ATTN: MFA  
P.O. Box 104  
Richmond, VT 05477

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

The above information will be invisible to reviewers

Racer's U-level, 2022-23 season: \_\_\_\_\_

How many years has the racer been a member of Cochran's Ski Club? \_\_\_\_\_

Or, [check here if you are new to Cochran's Ski Club](#)

Please let us know if there's anything else you'd like to share.