Canadian Tenpin Federation, Inc.
Fédération Canadienne Des Dix-Quilles, Inc.

Scholarship Awards For Education

REQUEST FOR SCHOLARSHIP FUNDS

Name:_____ CTF ID #:_____

Address:_____
City, Prov *Postal Code*

Phone:_____

Amount of scholarship funds requested: **$_____

Scholarship request for:

☐ Reimburse me for $_____
(example: tuition, books, etc.)
(Must include a receipt showing payment was made)

☐ Send check to the institution:
(Check with the institution and see if and when they will accept funds for you!!)

SAFE Use Only	

Name:_____

Attention:_____
(find out the exact department to send the cheque to)

Address:_____

City:_____ Province:_____ Postal Code:_____

_____ _____
(Signature of person requesting the funds) *(Date)*

_____
(Print name)

Mail to: Canadian Tenpin Federation
Attn: SAFE Program
916 – 3rd Avenue North
Lethbridge, AB T1H 0H3

or fax to: (403) 381-6247

You may email requests, but they must contain all of the above information. E-mail request to ctf@gotenpinbowling.ca.

Only fill out one form for the amount you are requesting, not one form for each scholarship letter you receive.