



**MONETARY ASSISTANCE FOR JUNIOR GIRLS
APPLICATION**

NAME _____

ADDRESS _____ TELEPHONE _____

CITY _____ STATE _____ ZIP _____

TOURNAMENTS APPLYING FOR _____

DATE OF BIRTH _____ GRADE IN SCHOOL _____

CRITERIA TO BE ELIGIBLE FOR WSCGA MONETARY ASSISTANCE

1. Must be under the age of 19 years of age while playing in applicable tournaments.
2. Must NOT be associated or affiliated in any way with a NCAA college or university.
3. Must participate in at least one (1) of the five (5) WSCGA major championships.
4. Must be a legal resident of the State of South Carolina.
5. Application must show **a breakdown of expenses in each category** with receipts attached and be received in the WSCGA office by September 1.

EXPENSES COVERED BY THE WSCGA

(Please include receipts)

- | | |
|--|--------------------------|
| 1. Travel expenses for tournament. | <input type="checkbox"/> |
| 2. Motels, hotel or other housing expense. | <input type="checkbox"/> |
| 3. Entry Fees | <input type="checkbox"/> |
| 4. Practice ball and caddies expense. | <input type="checkbox"/> |

EXPENSES NOT COVERED BY THE WSCGA

1. Food
2. Cart fees.
3. Chaperone fees and expenses.

The WSCGA Board of Governors allocates a certain amount of monies each year. The total of your request may not be available since we will distribute the money as evenly as possible from all applications received. Please send application and receipts to: WSCGA, Inez Long, P. O. Box 1759, Bluffton, SC 29910.

Applicant's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____