



# World Wrestling Camps



June 6-9, 2016

June 20-23, 2016

## Applicant Information

Camper Name: \_\_\_\_\_  
*Last First M.I. Age Grade*

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_  
*City State ZIP Code*

Home Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

School Attending: \_\_\_\_\_

Head Coach's Name: \_\_\_\_\_ Camp Desired: \_\_\_\_\_

Coach's Email: \_\_\_\_\_ Coach's Cell: \_\_\_\_\_

USA Wrestling Card# \_\_\_\_\_ Have you received a need based scholarship from NWAA before? (yes/no): \_\_\_\_\_

## Financial Information

*(Note: This information is kept strictly confidential, but it is necessary to evaluate the level of this award)*

Number of Adults in the Household: \_\_\_\_\_ Number of Children in the Household: \_\_\_\_\_

Household income as reported to the IRS in most recent tax year:

- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Below 10,000             | \$20,000-\$25,000        | \$30,000-\$35,000        |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| \$10,000-\$20,000        | \$25,000-\$30,000        | Above \$35,000           |

Are there any circumstances to be considered in your application?

\_\_\_\_\_  
\_\_\_\_\_

Send APPLICATION WITH REFERENCE to:  
NWAA, Attn: Scholarship Programs, 2347 Sunnyslope Drive, Dubuque, Iowa 52002  
Phone: 847-727-5472

E-mail: support@worldwrestlingcamps.com

**Application deadline is 5:00pm CST, Wednesday, April 15, 2016**

**All applicants will be notified by May 1, 2016**

**Campers given designated scholarships will receive additional information upon acceptance.**

