



Texas Chargers Inc. Scholarship Application

Date: _____

Name of person with CHARGE attending: _____

Your Name: _____

How many plan to attend in your party? _____

Address: _____

City: _____ Zip: _____

Phone Number: _____

Amount applying for: \$87.50 _____ or \$175 _____

Name of DARS Representative _____

I do not have a DARS Representative _____

Reason for Applying: (check which apply)

It is a hardship to cover the registration fee _____

Do not have a DARS Representative _____

Other: _____

Have you contacted your local school district for assistance: ___ Yes ___ No ___ not in school

Have you contacted your local ECI? ___ Yes ___ No ___ Does not qualify

Other Information: _____

Eligibility: All current Texas Residents affected with CHARGE Syndrome or Texas "families" are eligible for scholarships/financial aide provided Texas Charger Inc. Board of Directors approves and funding exists.

Please return form to beccagib40@yahoo.com or 214-709-3880 or mail to:

Becky Gibson, 1310 Comal Drive, Allen, Texas 77013