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 <u>if and when</u> 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
18762 58A Avenue,
Surrey, BC V3S 8G4

or email to: ctf@tenpincanada.com

Email requests must contain all of the above information. E-mail request to ctf@tenpincanada.com.

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