

# Hidden Valley Obedience Club Scholarship Application

Date: \_\_\_\_\_

Name \_\_\_\_\_ \*Age \_\_\_\_\_ \*(if applying as a Jr. Handler)

Dog's name: \_\_\_\_\_

Breed: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

HVOC member? \_\_\_\_\_

Purpose of scholarship/grant:

\_\_\_\_ Obedience class fees (Specify which class and date it begins:)

Class: \_\_\_\_\_

Date class starts on: \_\_\_\_\_

\_\_\_\_ Other

Please describe: \_\_\_\_\_

Is this the first HVOC scholarship you have requested? \_\_\_\_\_

What do you like best about your dog? \_\_\_\_\_

What is your goal in training your dog? \_\_\_\_\_

Upon completion of a class, you may apply for additional scholarships. Please email or mail all scholarship applications to:

HVOC C/O Scholarship/Grant Program  
PO Box 463035  
Escondido, CA 92046-303

Email to: [registrar@hiddenvalleyobedienceclub.org](mailto:registrar@hiddenvalleyobedienceclub.org)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Name – Parent if applicant is a minor)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Parent Signature)