

SMYRNA SURFARI CLUB, INC.

NEW SMYRNA GRADUATING SENIOR SCHOLARSHIP APPLICATION SUBMIT APPLICATION BY 3/31/2025 TO info@smyrnasurfariclub.org

APPLICANT'S GRADUATION YEAR: 2025

(please print or type)

Student's Full Name _____ Address _____

Telephone Number _____ Email Address _____ Age _____

List All Immediate Family Members:

Full Name	Address	Attended or is Attending
College? Father: _____	_____	_____
Mother: _____	_____	_____
Brothers/Sisters: _____ Age: _____	_____	_____
_____ Age: _____	_____	_____
_____ Age: _____	_____	_____

Father's Occupation: _____

Mother's Occupation: _____

Your length of residence in New Smyrna Beach: _____

How long have you been surfing? _____

Have you ever entered surf contests? _____ Approximately how many? _____

How many times have you placed first, second, or third in surf contests? _____

How many surfboards have you owned? _____

Please describe your current surfboard(s): _____

How often do you surf: _____

Where is your preferred location to surf: _____

Other than New Smyrna Beach, where have you surfed: _____

Please list any sponsors you may have: _____

In what other sports are you involved in? _____

Do you work? _____ If so, where? _____

How many hours a week do you work? _____

Please show your total estimated combined family annual income (check one):

_____ up to \$30,000 _____ \$30,000 to \$50,000 _____ \$50,000 to \$70,000

_____ \$70,000 to \$90,000 _____ \$90,000 to \$110,000 _____ over \$110,000

What is your current Grade Point Average (GPA)? _____

What is your current class standing? _____

In short paragraphs, please answer the following questions:

1. Describe your involvement in any extracurricular activities at school or with community service organizations:
2. What are your scholastic and career plans?
3. What are your future surfing-related plans?
4. Who in the world of surfing do you most admire? Why?
5. What direction do you think surfing should take in this area?
6. What effect has surfing had upon your life?
7. Describe your most memorable surfing experience (e.g., a contest win, a special surf trip, an exceptionally good ride, etc.), and explain why you consider it so special.
8. (To be completed by your Parents): What do think about surfing and your child's involvement in surfing?

SCHOLARSHIP APPLICATION REQUIREMENTS -DOUBLE CHECK APPLICATION

1. Please attach to application: Two recent photographs of yourself. (1 facial picture (no shades on) and 1 picture of you surfing)
2. Please attach to application: Your high school transcript
3. Please attach to application: Letters of recent reference from two (2) of your teachers.
If these items are not submitted with this application, this application cannot be considered.
4. Signed application by student AND student’s parent. Actual signatures required, not digital.
5. Submission of application to info@smyrnasurfariclub.org no later than 3/31/2025. Subject line should be: “smyrna surfari club scholarship application attached”
6. *Applicant should receive an acknowledgment of your application by the Surfari Club within 48 hours of submission. If you do not receive one, please resubmit.*

SCHOLARSHIP AWARD REQUIREMENTS

1. Scholarship award must be used within one year of award. Exceptions: Military Service, or recipient’s written request for extension to be approved by the Club membership.
2. Expenditure of scholarship funds may be used for recipient’s tuition, books, or room and board at recipient’s college campus. Proof of enrollment will be required at any time requested by the Smyrna Surfari Club.
3. Recipient must present an invoice from the college or trade school that indicates the student’s name, account number, amount due, address for payment, and what the payment is for (tuition, books, or college campus room and board).

THE UNDERSIGNED SMYRNA SURFARI CLUB SCHOLARSHIP APPLICANT CERTIFIES TO THE BEST OF MY KNOWLEDGE THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. APPLICANT AND PARENT FURTHER ACKNOWLEDGE THAT THEY HAVE READ THE AWARD REQUIREMENTS SET FORTH ABOVE.

Applicant’s Signature (REQUIRED/NOT DIGITAL)
Print Name: _____

Date: _____

Email: _____

Parent’s Signature (REQUIRED/NOT DIGITAL)
Print Name: _____

Date: _____

Email: _____

APPLICANT MUST HAVE A PARENT’S SIGNATURE IN ORDER TO APPLY FOR THE SMYRNA SURFARI CLUB, INC., SCHOLARSHIP

Smyrna Surfari Scholarship Application submit by 3/31/2025