

# Western Region Clown Association (WRCA)

Vice-President Russell Cornell  
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## ROBERT WILLIAM FLAHERTY RAMIREZ SCHOLARSHIP FUND APPLICATION

WRCA may award one or more scholarships each year based on need of financial assistance and depending on funds available. Scholarship money requested must pertain to attending the current year WRCA convention. Applicant must have been a member of the WRCA at least one year in the past five years. You may attach another paper to complete your answers. Application must arrive no later than August 15<sup>th</sup>. The WRCA Board will notify applicants by October 1<sup>st</sup>.

### NAMES

1<sup>st</sup> ADULT \_\_\_\_\_ Clown Name \_\_\_\_\_

2<sup>nd</sup> ADULT \_\_\_\_\_ Clown Name \_\_\_\_\_

### NAME(s) of Children:

\_\_\_\_\_ Clown Name \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Clown Name \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Clown Name \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Clown Name \_\_\_\_\_ Age \_\_\_\_\_

ADDRESS: Street \_\_\_\_\_

City / State \_\_\_\_\_ Zip \_\_\_\_\_

PHONES ( ) - \_\_\_\_\_ EMAIL \_\_\_\_\_

1. When did you last attend the Western Region Clown Convention? \_\_\_\_\_

2. Please describe your financial need or why you deserve this award:

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

SIGNED BY: \_\_\_\_\_

Primary Adult Applicant

DATE: \_\_\_\_\_

**Note:** This scholarship will pay up to & no more than 1-paid hotel room, 2-adults' convention registrations and 4-children's convention registrations.