



ALSTARZ CHEER ACADEMY

13347 West Main Street P.O. Box 1081 Larose, LA 70373
985-693-7109 gym 985-798-5102 fax
www.alstarzacademy.com crystal@alstarzacademy.com

PLEASE DO NOT PRINT APPLICANT NAME ON COVER SHEET

SCHOLARSHIP APPLICATION

Applications due May 1
Winner will be announced at the Rodeo May 26
Attendance is *HIGHLY* recommended

This application is for any male or female who has attended ALSTARZ CHEER ACADEMY a minimum of four sessions.

COVER SHEET

Name:	Age:	GPA:	Years @ ACA
Mailing Address:	ACT Score:	Phone:	School:
Email Address:			

Are you able to attend the rodeo on May 26?

Form #	
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For office use only



ALSTARZ CHEERLEADING ACADEMY SCHOLARSHIP APPLICATION

**Applications due May 1
Winner will be announced at the Rodeo May 26
Attendance is *HIGHLY* recommended**

Form #	Date Received:
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Please answer the following questions by typing responses. Please email applications to crystal@alstarzacademy.com or turn in at the gym by

May 1, 2018.

Tell us about your social/extracurricular activities.

Tell us about your faith based activities.

What are your plans after High School & Where?

Tell us the about your experience at ACA and explain how ACA has affected your life.

Explain why we should award you this scholarship