

# **Bentley Bedker Climbing Scholarship Scholarship Information**

### **About Bentley Bedker**

Bentley Bedker of Breckenridge was an avid outdoorsman and athlete, excelling in kayaking, Nordic and alpine skiing, and cycling. His greatest love and passion, however, was rock climbing. Bentley traveled around the world to climb, and touched the hearts of many along the way. Tragically, Bentley died unexpectedly in July of 2009. The Bedker family is graciously offering this scholarship to Summit County youth climbers in loving memory of Bentley.

#### **Scholarship Purpose**

The Bentley Bedker Climbing Scholarship may be used by youth residents of Summit and surrounding counties to pay for 50%-100% of enrollment costs for any youth climbing program. Applicants may also apply for the scholarship to cover the costs of a climbing harness, climbing shoes, chalk bag and belay device/carabiner if they are enrolled in a current or upcoming youth climbing program.

#### Requirements

- Submit a complete, legible application.
- Scholarship recipients must write a hand-written thank you letter to the Bedker family.
- Scholarship recipients must attend a minimum of 80% of meeting dates for the program in which they are enrolled. *If this requirement is not met, the recipient may forfeit their scholarship award and have the full cost of the program charged to their account.*

#### **Selection and Award Process**

Scholarship applications will be reviewed on an individual basis by the Climbing Scholarship Committee. All applicants will be notified as to the decision concerning their scholarship application within 30 days. Scholarships will be awarded at the discretion of the Climbing Scholarship Committee and may cover anywhere from 50-100% of the total program or equipment cost.

For more information, please contact the Outdoor Programs Coordinator at <a href="mailto:srobins@townofbreckenridge.com">srobins@townofbreckenridge.com</a> or (970) 547-4324

Revised 8/2016 Sarah Robins



## **Bentley Bedker Climbing Scholarship**

## **Application Form**

In an effort to provide Summit County residents access to our rock climbing programs, individuals may complete this form to apply for a scholarship which may be used to cover enrollment in a youth climbing program or climbing equipment. All submitted applications will be reviewed based on the expressed need of the individual applicant. All application material is strictly confidential and will be reviewed only by the Climbing Scholarship Committee.

| Applicant Informa   | ntion                  |                       |                        |  |
|---|------------------------|-----------------------|------------------------|--|
| Last Name   |                        | First                 | M.I                    |  |
| Mailing Address   |                        |                       |                        |  |
|   |                        |                       | Zip                    |  |
| Phone   |                        | Email                 |                        |  |
| What climbing program(s) or climbing gear are you applying for? You may check more than one |                        |                       |                        |  |
| Climbing Te   | eam Cliff              | Thangers (6-9 yrs)    | 1,2,3 Climb! (2-3 yrs) |  |
| ☐ Junior Clim   | bing Team   Clim       | nbing Shoes           | ☐ Climbing Harness     |  |
| Beginner Cl   | imbing Camp 🔲 Be       | elay Device and Caral | oiner                  |  |
| ☐ Intermediate Climbing Camp ☐ Advanced Climbing Camp                                       |                        |                       |                        |  |
| Start Date of Program Desired (If Applicable):  |                        |                       |                        |  |
| Have you participated in a climbing program in the past?                                    |                        |                       |                        |  |
| If yes, which program and when?   |                        |                       |                        |  |
| Are you currently   | Recreation Center Page | ss Holders?           | Yes No                 |  |

| Please describe your climbing experience and interest in climbing in the future.   |  |  |  |
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| Why should you be selected to receive this scholarship? Include a description of both desire and need. If additional room is needed, please attach a separate page.  |  |  |  |
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| I certify that the above information is accurate and complete. I also certify that I have read, understand and accept the provisions for the scholarship detailed in the Scholarship Information sheet. I understand that this information is being given for consideration of a scholarship and that Breckenridge Recreation Department staff may attempt to verify the information on the application. |  |  |  |
| Signature of Applicant/Parent or Guardian Date   |  |  |  |
| Please submit your completed application in a sealed envelope to:  Breckenridge Recreation Center, Attention: Sarah Robins PO Box 168, Breckenridge, CO 80424  |  |  |  |