

1902 Orange Tree Ln, Ste 130 Redlands, CA 92374

GRANT REQUEST/ANNUAL BUDGET ESTIMATE

1.	Applicant Name			
2.	Phone Number	Email		
3.	USEF Number	D.O.B. (if young rider)		
4.	Year for Budget 1/1/ through 12/31/	-		
5.	Name of horses expected to support			
6.	Levels you expect to compete			
7.	Which competitions/training sessions do you expect	nich competitions/training sessions do you expect you will submit requests for?		
		_		
8.	Estimated Entry Fees X estimated number	er of events:	= Total Entry Fees	
9.	Estimated Stabling FeesX estimated number	er of events:	= Total Stabling Fees	
10.	Estimated Coaching FeesX estimated number	er of events:=	=Total Coach Fees	
11.	Estimated Transport CostX estimated number	of trips:=To	otal Transp Cost	
12.	Estimated Vet Expenses	Other		
13.	Total for above expenses			
14.	funds available to me from sources other than SCES ($e.g.$ personal funds, corporate sponsorship) for my ompetitive expenses during the grant period:			
15.	Explain the benefit you would receive toward your competitive goals from the requested grant.			
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16. Use the back of this form, or attach additional sheets, to provide any additional information you have for the grants committee to consider.

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By signing this form, the applicant further certifies that any funds that are received from the SCES will be used exclusively to reimburse his/her athletic endeavors. The applicant certifies that he/she is a bona fide amateur athlete as such term is defined for equestrian competition by the International Olympic Committee.

Signature of Applicant

Grant Applications are reviewed and acted upon weekly. Applicants will be informed of the action taken on their request.

Once a grant request has been acted on by the Trustees, such action is final. The applicant is not however precluded from making another grant request in the future. Grant requests will not be returned to the applicant.

In the event a rider loses his/her standing for a period of two years, any unused funds shall be returned to the General Fund of SCES.