

South Florida Dynamics  
Application for Financial Aid

Name of Twirler: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Event	Date of Event	Amount Requested
Travel Destination	Mileage/Ticket/Tolls	Amount Requested
Lodging	Amount per Night	Amount Requested
Food	Number of Days	Amount Requested
Apparel	Item(s)	Amount Requested
Passes/Tickets	Number Needed	Amount Requested
Total Amount Requested		

Signature of Applicant: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Awarded \_\_\_\_\_ Date: \_\_\_\_\_

Check # or Direct Payment \_\_\_\_\_