



# Pierre Players Scholarship

Name: \_\_\_\_\_ School District: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of College or Camp you plan to attend: \_\_\_\_\_

\*If Camp, what is the total amount: \_\_\_\_\_

Pierre Players and/or Little Players Involvement: \_\_\_\_\_

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Other theatre involvement: \_\_\_\_\_

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How has the fine arts impacted your life? (Attach additional pages as needed) \_\_\_\_\_

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Pierre Players Community Theatre | 605.224.7826  
P.O. Box 933 | 109 S. Pierre St | Pierre, SD 57501  
www.Pierreplayers.com

**Please mail your applications to the PO Box above or e-mail to [littleplayers605@gmail.com](mailto:littleplayers605@gmail.com)**

**Applications must be received (not postmarked) by 3/31/2024.**

Date Received: \_\_\_\_\_

Approved      Y      N

Amount: \_\_\_\_\_

Date check sent: \_\_\_\_\_