



The Hyannis Yacht Club Foundation Scholarship Application

Applicant Name: _____

Age: _____ Grade: _____

Name of School Attending: _____

Have you received a scholarship from The Hyannis Yacht Club Foundation in the past?
(Please check one) _____ Yes _____ No

Contact Information

Street: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Describe your previous swimming and/or sailing experience, if applicable:

Please answer the following questions concerning your request for a scholarship:

1. Explain why you would like to participate in the sailing/swimming program at Hyannis Yacht Club. What is driving your desire to participate in these programs?



2. Tell us a little about yourself. Please include information about your interests, aspirations and goals.

3. Describe the financial circumstances that led you to apply for this scholarship.

4. If there are any extenuating circumstances you would like The Foundation to consider, please describe them here.

Please submit this application no later than May 1, 2026 for consideration to:

The Hyannis Yacht Club Foundation
Attn: HYCF Scholarship
490 Ocean Street
Hyannis, MA 02601