

I Want To Play

Application for Assistance



Team Asa wants to make sure that everyone has the opportunity to be part of the team!

Name of Applicant: _____

Age: _____ City of Residence: _____

Assistance Requested: *(Circle the option below or tell us about the need)*

Buddy Bowling Scholarship – *Includes registration & weekly fees*

Special Olympics Scholarship – *Includes participation & uniform fees*

Special Olympics Medical

Other: _____

Contact Name: _____

Email Address: _____

Phone: _____

Team Asa is a non-profit 501 (c) 3 that provides financial support to people with disabilities, enabling them to join clubs, teams and organizations that foster a sense of self, team and of extended family.

Please email application to AzTeamAsa@gmail.com or Mail to
Team Asa c/o Denise Rentschler 1502 E. Northshore Dr. Tempe, AZ 85283