Jackie Verda Memorial Equestrians with Disabilities
YEDA Scholarship

$2000 to the Winner
$1000 to the Runner Up
$750 to 3rd Place • $500 to 4th Place • $250 to 5th Place

Qualifications and Requirements

ALL INFORMATION MUST BE SENT IN ITS ENTIRETY TO BE CONSIDERED FOR THE AWARD(S)

1. Must be a current YEDA member competing in the Equestrian with Disability Division of Amber or Topaz.
2. Must be a current member in good standing.
3. Eligible applicants must have completed at least 12 hours of community service in the past two years.
   Include organized documentation.
4. Enclose a letter from your YEDA coach verifying that you have been on the team for at least one show season.
5. Submit one written letter of recommendation.
6. Write a 250–500 word essay on the following topic, “What are the benefits of riding horses and competing in YEDA.”
7. Applicants must include all the following information in the mailed packet, or this application will be considered incomplete. Please PRINT all documents and include in packet.
   - Application Form
   - Verification letter from team coach or team advisor
   - Letter of recommendation
   - Essay
   - Community service documentation
8. All completed packages must be postmarked on or before April 1st.
9. The Achievement Award Committee will announce all scholarship recipients by June 1st.
10. All applicants agree upon submission that your essay and media presentation could be used by YEDA.

Please mail completed packet to:
Youth Equestrian Development Association
Attn: Scholarship Committee
326 Pleasant St, Ashland, OH 44805
Questions ONLY Email: trafeld@showyeda.com
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Application

Name: ________________________________  Age: __________

YEDA Team: ___________________________  Number of YEDA Membership Years ______

Email Address: _________________________  Phone Number: _________________________

Mailing Address: ________________________________________________________________

In a paragraph or less, explain what you will use this monetary award for if you win.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

This signature verifies agreement upon submission that my essay and media presentation could be used by YEDA.

Signature: ________________________________  Date: ______________

If under 18, parent/guardian: ________________________________

Please Include all of the following PRINTED in Submission Packet:

• Application Form
• Verification letter from team coach or team advisor
• A letter of recommendation
• Essay
• Community service documentation

Please mail completed packet to:
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Attn: Scholarship Committee
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Ashland, OH 44805
Email: trafeld@showyeda.com
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