



Live Like Jace Foundation

522 Beretta Dr

Laurel, MT 59044

www.livelikeyace.com

Email: livelikeyace@gmail.com

Phone: 406-661-8416

501(c)(3) non-profit organization: 99-3547983

Application for Scholarship

The Live Like Jace Foundation is a Montana Non-Profit Organization that aims to create opportunities for families facing adversity to escape the challenges of their daily lives, connect with nature, and create lasting memories. We offer outdoor opportunities related to golfing, baseball, hunting, fishing, and other activities for those who have fallen on tough times or been affected by a cancer diagnosis. We believe in the healing power of nature and the importance of family bonds.

The Foundation honors Jace’s memory and perpetuates the values he embodied, inspiring others to embrace life with passion, kindness and humility.

Please provide complete information in the application so the review committee can consider and prioritize your request. For questions, contact 406-661-8416 or livelikeyace@gmail.com.

Print and Fill

Is this the Applicant’s first application to the Live Like Jace Foundation (yes/no)	
Today’s Date	
Applicant’s First and Last Name	
Applicant’s Age	
Guardian’s First and Last Name (if Applicant is not at least 18 years of age)	
Street Address or PO Box	
City, State Zip	
Applicant’s Email (use Guardian’s Email if Applicant is not at least 18 years of age)	
Applicant’s Phone (use Guardian’s Phone if Applicant is not at least 18 years of age)	
Best form of contact (email/phone)	



Head of Household First and Last Name	
Last or Current Employer	
If not employed, please explain why and how long	
How many adults in household	
Adult Ages	
How many children in household	
Children Ages	
Is this a cancer situation? (yes/no)	
If yes, please explain	
Please describe how the applicant embraces the values of passion, kindness, humility and resiliency (attach an additional sheet if more space is needed and note here "see attached")	



<p>What is your request for the Live Like Jace Foundation (attach an additional sheet if more space is needed and note here "see attached")</p>	
<p>Applicant's or Guardian's Signature (by signing you are certifying the information provided is accurate)</p>	
<p>If somebody other than Applicant or Guardian is submitting this form, please provide full name with contact email and phone</p>	

Application Checklist

- ✓ Application is fully complete
- ✓ You certify that the information provided is accurate to the best of your knowledge by signing the application via checking the box
- ✓ Return application via one of the below:
 1. Email: livelikejace@gmail.com
 2. Mail: Live Like Jace Foundation, 522 Beretta Dr, Laurel, MT 59044

Applications are processed within two (2) weeks upon receipt. All applications are responded to via the contact means noted. The Live Like Jace Foundation reserves the right to determine the necessary application processing procedures to make a determination. Thank you.