



**Bob's Discount Furniture \$100,000 High School Heroes  
Scholarship Program – 2009-2010**

**WINNER CONTACT FORM**

Congratulations! Your school may have already earned scholarship money. The official scholarship amount that your school earns will be posted on [www.bobshighschoolheroes.com](http://www.bobshighschoolheroes.com) on June 7<sup>th</sup>.

**Student scholarship winners must be selected by Friday, June 18<sup>th</sup>, 2010.** Once the students have been chosen, please complete the form below and return it to Karen Murray. **Please list winning student names in order of winning the scholarship** (example: if you list 10 students and your school wins 1st place, only the first five names listed on this form will be awarded the scholarship). **Fax form to Karen @ 860-678-5436 by Friday, June 18!**

**HIGH SCHOOL CONTACT INFORMATION** (please print)

High School Name: \_\_\_\_\_  
School Contact Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Work number: \_\_\_\_\_ Work Email: \_\_\_\_\_  
Summer Phone: \_\_\_\_\_ Summer Email: \_\_\_\_\_

**STUDENT #1 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #1 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #2 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #2 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #3 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #3 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #4 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #4 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #5 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #5 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #6 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #6 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #7 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #7 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #8 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #8 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #9 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #9 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #10 CONTACT INFORMATION** (please print)

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

**STUDENT #10 BURSAR OFFICE CONTACT INFORMATION** (please print)

College Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip code: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Please check this box if a photo release form is on file at your school.

Please FAX this form to Karen Murray at 860-678-5436 by June 18<sup>th</sup>  
or mail to American Red Cross, DRD, 209 Farmington Ave., Farmington, CT 06032

Questions? Call Karen Murray at 860-678-5409 or email [murrayk@usa.redcross.org](mailto:murrayk@usa.redcross.org)

