



Nonotuck Valley Hockey Association (NVHA) Thomas Motyka Scholarship Application

NVHA is thrilled to announce the establishment of the Thomas Motyka Youth Hockey Scholarship for the upcoming 2025-2026 hockey season. The scholarship is dedicated to the memory of Thomas Motyka, a beloved player within the Nonotuck community who tragically lost his life in a car accident.

Thomas was not only a talented athlete but also a passionate ambassador for the sport of hockey, inspiring teammates and friends alike with his dedication and love for the game. In honor of his legacy, NVHA is offering full scholarships to four deserving players in need of financial assistance, allowing them the opportunity to pursue their hockey dreams without the burden of financial constraints.

We invite eligible players and their families to apply for this scholarship, which aims to make hockey accessible to those who might otherwise be unable to participate. Through this initiative, we hope to foster Thomas's spirit of teamwork, determination, and love for the sport, ensuring that his memory continues to impact young athletes for years to come. We look forward to seeing the impact of this scholarship on our hockey community!

Eligibility Requirements

Skating and hockey experience are not required to apply. To be eligible for the Thomas Motyka Scholarship, applicants must:

1. Be under the age of 14 for 2025-2026 season
 2. If selected, guardians and player will follow NVHA Code of Conduct.
 3. Submit a completed application by 2-28-2025 to nvhahockey@gmail.com
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Applicant Information

- Full Name: _____
- Date of Birth: _____
- Parent/Guardian Name(s): _____
- Contact Information (Phone/Email): _____
- Years of Skating Experience: _____
- Years of Hockey Experience: _____
- Current Team Name (if applicable): _____

Questions

1. Describe a time when you showed leadership, teamwork, or helped a friend/teammate on or off the ice. (300 words max)

2. Why do you want to play hockey? (300 words max)

Acknowledgment

I certify that the information provided in this application is accurate to the best of my knowledge.

Parent/Guardian Signature: _____ **Date:** _____