



Scholarship Application

Payment or a completed Scholarship Application is due with the Sport Registration Form.
A new Scholarship Application must be submitted by each family for each season/sport.

Player's Last Name _____ First Name _____

Male Female Grade _____ Date of Birth _____

Player's Last Name _____ First Name _____

Male Female Grade _____ Date of Birth _____

Parent's or Guardian's Name(s) _____

Mailing Address _____

Email _____ Primary Phone _____ Secondary Phone _____

Circle the sport in which your child will be participating:

Tackle Football Flag Football Volleyball
K-2 Basketball 3-6 Basketball T-Ball Coach Pitch Baseball Softball

Scholarship Request: <input type="checkbox"/> Partial <input type="checkbox"/> Full <input type="checkbox"/> Multiple
Total Amount Requested _____ Total Amount Paid _____ Date _____
**Tackle Football limited to \$45 Scholarship
<i>If unable to pay in full today, please indicate when you will be able to complete payment:</i>

Please use the back of the form to write a short statement explaining why you need this scholarship.
By signing this I and/or other family members agree to volunteer four (4) hours for each scholarship awarded.

Parent or Guardian Signature Date _____

For OFFICE Use Only:
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Amount _____
<input type="checkbox"/> Initials _____