5 Cities Softball Scholarship Application

Requests for scholarship must be submitted BEFORE regular registration ends. Applications submitted during late registration or later, will NOT be considered.

Player Name:		Birthdate:
Parent Name:		
Phone #:	emai	il:
I understand that participation the following that will work for	•	expense for everyone and will do my part by doing se circle):
1. Pay \$ per mo		and ending with a final payment of \$ ifee of \$130.
2. Request a reduction in re	gistration price. I	can pay \$
 I can only pay for a jersey pay for fields and umpires. 	and insurance at	t a price of \$25 but will sell a box of candy to help
4. I can only sell candy. I will of \$1 per bar).	sell boxe	es of candy. (Each box contains 60 bars at a price
5. None of the above is feas child.	ible for my family	at this time and request a full scholarship for my
scholarship from the league that will limit other children fi	I am requesting from receiving like hild will participate	child to play softball, and by requesting a funds be distributed from a fixed scholarship fund funds. In exchange for consideration for any of e fully by attending all practices and games a we are applying for.
Parent Signature:		
For 5 Cities Softball Schol	arship Committe	ee Use Only:
Season Requested:		
Approved:De	clined:	Reason:
Registrar's Signature:		
Parent Notified by:		Date: