



# Scholarship Application

Great Basin Youth Soccer League

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

School Attending: \_\_\_\_\_

Season Request: Fall or Spring: \_\_\_\_\_ Year \_\_\_\_\_

Is this request for the recreational or competitive division? \_\_\_\_\_

Competitive Team Name: \_\_\_\_\_

Great Basin Youth Soccer League will grant a 50% scholarship. The funds will be used for Great Basin Youth Soccer League registration fees only. The scholarship committee will meet and review all requests. It will determine the amount available for scholarship funding each season. You will be notified if your scholarship request was unable to be granted.

Amount Requesting? \_\_\_\_\_

All applicants (players) must write a 1-2 paragraph essay on what soccer means to them and how soccer would benefit their life. If the applicant is unable to write an essay, they may draw a picture. Please attach the essay or picture on a separate sheet and turn it in with this application.

Guardian Signature: \_\_\_\_\_