



SCHOLARSHIP REQUEST FORM

Please Use One (1) Sheet per Player

PLAYER NAME _____ GRADE _____

PARENT NAME _____

PHONE NUMBER _____ EMAIL _____

What portion of the registration fee are you able to contribute, if any?
(Please select one)

- | | | | |
|----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> \$10.00 | <input type="checkbox"/> \$20.00 | <input type="checkbox"/> \$30.00 | <input type="checkbox"/> \$40.00 |
| <input type="checkbox"/> \$50.00 | <input type="checkbox"/> \$60.00 | <input type="checkbox"/> \$70.00 | <input type="checkbox"/> \$80.00 |
| <input type="checkbox"/> \$90.00 | <input type="checkbox"/> \$100.00 | <input type="checkbox"/> \$110.00 | <input type="checkbox"/> \$120.00 |

Please explain below why you would like a scholarship, or you can attach a free and reduced school lunch qualification form.

PARENT SIGNATURE _____ DATE _____

If you have any questions, please email St. Anthony Football Boosters President, Dustin Halverson at president@boostersfootball.com or phone at 612.369.0009. All information will be kept confidential.

*****A discount code will be emailed to you to use during the online registration process.**

**Email or Mail this form to:
St. Anthony Football Boosters
ATTN: Dustin Halverson
president@boostersfootball.com
3405 33rd Avenue NE; St. Anthony, MN 55418**