



CCGSA SCHOLARSHIP FORM

PARENT NAME: _____ **DATE:** _____
PLAYER NAME: _____ **DOB:** _____
ADDRESS _____ **CITY:** _____ **ZIP:** _____
PHONE 1: _____ **EMAIL:** _____
ASSOCIATION _____ **TEAM** _____

Yearly Family Income: Under 20K _____ 20-30K _____ 30-40K _____ 40-50K _____ Over 50K _____

On the free lunch program? Y___ N___ On the reduced lunch program? Y___ N___
(Please provide documentation if yes to either).

1. Please provide a brief explanation for the scholarship need in the space below. (Attach an additional sheet if necessary.)

2. How much is being requested? (Maximum amount \$100.00) \$ _____

3. What are the funds being requested for? _____

I, _____ in good faith, am applying for scholarship assistance towards registration or equipment fees, in order for my child to be able to play USA softball for a CCGSA team. It is understood that the scholarship assistance is based on and limited by funds budgeted. It is also my understanding that this scholarship does not cover items such as individual team fees such as tournaments, trophies, Jamboree or coaches gifts.

=====

ASSOCIATION – Below please provide your recommendation in support of this scholarship request, including level of volunteerism of the family in support of the association’s goals.

Full amount of registration/other \$ _____ Amount Covered by local Association \$ _____

