



SPRING LAKE PARK YOUTH LACROSSE ASSOCIATION

● Scholarship Request Form ●

The Spring Lake Park Youth Lacrosse Association (SLPYLA) provides registration fee scholarship assistance to families who demonstrate a need or hardship that prohibits their child the opportunity to play the game of lacrosse without some financial relief. The scholarship program is funded by donations and fundraisers. Please be aware that the funds are limited and assistance will be dependent upon the SLPYLA funds available. Financial Assistance is not provided for the \$30 annual US Lacrosse membership fee or equipment rental/purchase.

ELIGIBILITY

In order to be eligible, you must:

- Live within the Spring Lake Park District 16
- Commit your player to attend a minimum of 80% of scheduled practices and games
- Volunteer a minimum of 10 hours during the scholarship season (several opportunities available)
- Be enrolled in the Free or Reduced School Lunch program or families experiencing a financial hardship

APPLICATION DEADLINE & REQUIREMENTS

Completed applications must be submitted prior to registration and received no later than February 4th. Each applicant must also submit official documents signifying the child is currently receiving aid. Submit your request to orreym@yahoo.com.

SCHOLARSHIP AWARD DATE

Applicants will be notified of their scholarship award and the amount prior to February 4th registration deadline.

Player Name: _____ Team: 8U 10U 12U 14U

Player Address: _____

Parent Name: _____ Email: _____

Scholarship Eligibility: Enrolled in the free & reduced school lunch program with SLP Dist 16
 Experiencing a financial hardship.

Please describe hardship: _____

Have you received a scholarship in the past from the SLPYLA? YES NO

Please select the volunteer opportunities you would be interested in:

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Team Manager | <input type="checkbox"/> Scorekeeping during games | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Field Prep/cleanup | <input type="checkbox"/> Equipment hand out/turn in | <input type="checkbox"/> Other: _____ |

TERMS & CONDITIONS

I will assure that my child attends practices, games and team activities at least 80% of the time. I will provide the support needed to allow him/her to be a productive member of the team. I understand that the SLPYLA is non-profit youth organization run by volunteers and that every scholarship award recipient family must volunteer to support the clubs programs. I will complete my volunteer assignment and assist in any way that I can. I understand that failure to honor your commitment/obligation/task to the organization will result in the suspension of any future scholarship opportunities.

Signature of Parent/ Guardian

Date

SLPYLA only:
Date Received: _____ Reviewed by: _____ Approved: _____ Notified parents: _____