



Forest Lake Soccer Association

P.O. Box 442
Forest Lake, MN 55025
www.forestlakesoccer.org

SCHOLARSHIP APPLICATION

This scholarship is awarded upon financial need. Scholarships will be awarded up to 50% of the registration fees and may be less in the event of high scholarship demand.

LAST NAME: _____ FIRSTNAME _____ MI _____

MALE FEMALE BIRTHDATE: ____/____/____ Age: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE #: _____ CELL PHONE #: _____

E-MAIL: _____

SCHOOL ATTENDING: _____ GRADE: _____

FATHER'S NAME: _____ WORK #: _____
Last First

MOTHER'S NAME: _____ WORK #: _____
Last First

PLACE OF EMPLOYEMENT: _____

Check the total gross income (before taxes) earned by all the adults in your household during the last year:

- Under \$25,000 \$25,001-30,000 \$30,001-35,000
 \$35,001-40,000 \$40,001-45,000 \$45,001-50,000 over \$50,000

Check assistance the player's family receives:

- Subsidized Housing Food Stamps Medical Assistance
 Free School Lunch Reduced School Lunch

Please provide a statement of the circumstances that make it difficult to pay the registration fees.

Read and sign:

By signing this document, I acknowledge that all statements made in this application are true or believed to be true.

Signature of Person Filling Out Application

Date