

Sandy Youth Football 2009 Scholarship Request Form

Player Name: _____
School: _____ Grade: _____
Parent's Name: _____
Phone (home): _____ Phone(other): _____
Address: _____
Email: _____

I am requesting a discounted scholarship be extended to the player named above for the following reason(s):

As the parent(s) or legal guardian(s) of the above player I agree to volunteer for 10 hours of the following league sponsored activities:

Field Maintenance Concessions Team Parent

Fundraising Equipment Distribution/Collection

Each year Sandy Youth Football distributes a limited number of scholarship discounts based on financial necessity. Because these resources are limited they cannot be extended to waived players outside of the league grade limit of 3rd-8th grade.

All information collected on this form will be held strictly confidential.

**This form should be mailed in to our PO Box at Sandy Youth Football,
PO Box 1562, Boring, OR 97009**