



# **Mequon Soccer Club**

## **Scholarship Application Form**

The following are not covered by Scholarship Award and must be paid by each player:

- \$200 Commitment Fee
- Team Tournament Fees (that are not covered by individual MSC Program fee)
- Reimbursement of coaching staff travel expenses
- Purchase of full uniform package

*There are NO exceptions to these requirements*

Player's Name: \_\_\_\_\_ Team: \_\_\_\_\_

Mother's / Guardian's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Father's / Guardian's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Dependent Children (*children living in the home who are under the age of 18*):

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

**CURRENT ANNUAL HOUSEHOLD INCOME IS REQUIRED:**

\$: \_\_\_\_\_

If there are additional family circumstances that should be considered please use the space below. If additional space is needed, please attach a page.

I understand that applying for financial aid does not automatically grant me financial aid. I certify that the above information is correct and true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_