



# Huntingburg Youth Soccer Scholarship Request Form



Any ISFC player who plays recreational soccer for Huntingburg Youth Soccer or has played in the past is eligible to apply.  
Funds will be paid directly to the player's team account.

**Applications must be received by January 21st  
Mail to HYSL, PO Box 50, Huntingburg IN 47542**

Player Name: \_\_\_\_\_ ISFC Team: \_\_\_\_\_

Number of Previous Seasons Played for ISFC: \_\_\_\_\_

Played Huntingburg Youth Soccer: YES NO

Number of Seasons Played for Huntingburg Youth Soccer: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

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

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

Email: \_\_\_\_\_

## Confidential Family Information:

Participated in ISFC Fundraisers: YES NO

Player Fees Owed This Season: \$ \_\_\_\_\_

How Much of Fees Are You Able to Pay? \$ \_\_\_\_\_

Total Household Income: \$ \_\_\_\_\_ Number of Wage Earners: \_\_\_\_\_

Number of ISFC Players in Household: \_\_\_\_\_

**Briefly describe why scholarship aid is being requested for this player:**

Your signature below acknowledges that all the information on this application is accurate as of the date indicated.

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