

# Brunswick Soccer League Travel Program Scholarship Application

Name of applicant: \_\_\_\_\_ DOB: \_\_\_\_\_ Travel team level: \_\_\_\_\_

Parent/guardian name: \_\_\_\_\_

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

Contact phone: \_\_\_\_\_ Contact email: \_\_\_\_\_

Reason for wanting to play travel soccer:

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Amount requesting: \$\_\_\_\_\_ Reason for requesting scholarship: \_\_\_\_\_

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Recipients of scholarship funds and their parent/guardian understands this is a "give-back" program in which the recipient willingly "gives back" to the Brunswick Soccer League through service. This promotes engagement of soccer players with the league, develops character, and increases the league's ability to provide scholarship monies.

Please indicate areas willing to help in:

Lining the fields

Club projects/cleaning/painting/maintenance

Refereeing

Team mentoring (provides technical support to a team under guidance of a coach over 18)

Other (please describe your skills/idea): \_\_\_\_\_

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Number of hours of give-back time will be part of the scholarship offer. U8/U10/U12 recipients must be accompanied by a parent or guardian while giving back.

Acceptance of award indicates agreement to give-back for the number of hours on award offer. Applicant/parent understands failure to complete give-back/service hours will disqualify the applicant from receiving the scholarship credit, resulting in responsibility for full program cost.

\_\_\_\_\_  
Applicant signature/date

\_\_\_\_\_  
Parent/guardian signature/date

*Please print this form. Give the completed form to a board member, email it to BrunswickSCBoard@gmail.com, or mail it to: Brunswick Soccer Club, 3975 NY-2, Troy, NY 12180*

*Scholarships will be discussed by the board and recipients notified monthly. Application deadline is January 15th, 2024.*