



SHERIDAN STORM SOCCER

Scholarship Application

The Essence of Storm Soccer

The Sheridan County Soccer Association is focused on nurturing the potential of kids during all levels of their soccer development. This starts at ages U-8 and continues in the Club until U-14. The Storm Club, in fostering a sense of social responsibility in Sheridan County, wants to ensure that every child has access to enjoy soccer at the Club level. As such, Sheridan County Soccer Association offers scholarship opportunities for individuals who may not be able to pay the associated fees.

Getting Started

To get started, please read the details of this Scholarship Application and submit the completed application to:

Sheridan County Soccer Association
PO Box 6765
Sheridan, WY 82801
sheridanstormsoccer@gmail.com

Everyone is Welcome

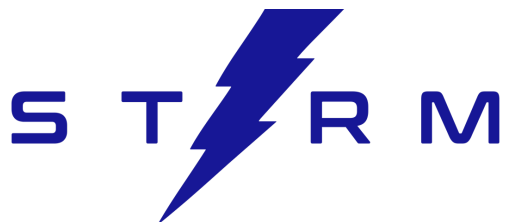
The Sheridan County Soccer Association welcomes all who wish to participate and believes that no child should miss the opportunity to play soccer at the Club level based on their ability to pay. Through our partnership with generous donors and Club affiliations, SCSA seeks to provide assistance to youth and families. This scholarship is based on individual needs and circumstances, and will be awarded on a case by case basis. Scholarship recipients must meet income guidelines to receive assistance.

Committed to our community

The amount of assistance is determined in a fair and consistent manner. Every player receives the same opportunities and benefits regardless of whether or not they receive a scholarship. Storm players can feel confident knowing that they are a part of an organization that genuinely cares for the well-being of all people, and is committed to the youth of this community.

A volunteer organization dedicated to youth, soccer and fun!

Sheridan County Soccer Association (SCSA) gives no guarantee of assistance and reserves the right to deny application requests at the sole discretion of the SCSA Board. Scholarships are non-transferable.



SCSA SCHOLARSHIP APPLICATION

Player's Name: _____

Team (age group): U-8 u-10 u-12 u-14 Gender: M or F

Phone: _____

Parent/Guardian Name	Employer	Work Phone	Monthly Income
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1. _____	_____	_____	\$ _____
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2. _____	_____	_____	\$ _____
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Cell Phone # P1: _____

Cell Phone # P2: _____

Email: _____

Number of Persons in Family _____

Total Monthly Household Income (all sources) \$ _____

Amount family is able to pay/contribute for player to participate \$ _____

Expense family anticipates being unable to cover \$ _____

Required Documentation (please attach to this application)

- COMPLETED scholarship form
- First page of last year's 1040 Tax Return
- Last 2 month's pay stubs (pay stubs required from both parents)
- Letter of need with explanation of any unforeseen hardships or circumstances

All scholarship recipients and Parents/GUARDians are required to fulfill a minimum of 10 SCSA volunteer hours during the course of the season. you will be asked to participate in team or club related activities (such as League weekend, Snicker's cup, state cup, etc.) as well as document and validate your volunteer hours. I certify that the information on this application is accurate and complete. I also agree that if my player receives a scholarship that we will adhere to the rules of the Sheridan county soccer association

- Storm Soccer Club

Signed: _____

Date: _____