

Our mission is to provide the youth in our community with the opportunity to play the game of soccer. With that in mind we know that some families may need assistance with the tuition cost for their player. Please use this form to formally request assistance. Please fill out the information below to the best of your ability. All scholarship forms are due back by November 1st. Your information will be kept confidential.

Player Name:	Date of Birth:
Address:	
School District:	
Former Bandits Player? Date	s?
Have you received our scholarship befor	
Parent name:	
Marital Status:	
E-mail address:	
Phone number:	
Household Size: Adults:	Children:

Please tell us in your own words why you would benefit from receiving this scholarship:			
Any additional information that may help us in our decision:			
Please circle the range that best describes your yearly household income information:			
\$40,000 and below	\$40,000-\$50,000	\$50,000-\$60,000	
\$60,000-\$70,000	\$70,000+		

Please allow 30 days to process your request. You will be notified by e-mail when a decision has been made.

^{**}Completion of form does not guarantee award. Financial assistance will be granted to one eligible family based on form responses. Any application with inaccurate or incomplete information will not be considered.