



DCFC Scholarship Form

This form may be used by travel or recreational players to apply for financial assistance. DCFC is pleased to offer a scholarship program for youth soccer athletes who are in documented need of financial assistance in order to play in our programs. Acceptable documentation includes evidence of any of the following: free/reduced school lunches, public assistance, unemployment, or food stamps. In absence of any of these items your request will still be considered but you may also be eligible for our payment plan. Each scholarship request will be considered on a per season basis.

Terms of Program:

1. DCFC requires all applicants to pay \$25 per season (travel) or \$10 per season (recreation).
2. DCFC requires all applicants to provide operational support (i.e., field maintenance help, tournament support). This means that the applicant and/or his or her family must fulfill 5 hours of service through the course of the season; volunteer service is required of all DCFC families.
3. Players are committed to a team for the ENTIRE season; this requirement is no different for scholarship recipients.
4. Failure to adhere to these requirements may void the scholarship agreement which would make the applicant responsible for the entire cost of club participation.
5. Approved applicants will be contacted by a member of the scholarship committee or club representative.

Please print legibly:

Name _____
Age _____ Birthdate _____ Sex _____
School _____ New Player YES NO

Parent/Guardian's

Name _____

Employer _____

Address _____

City/State/Zip _____

Phone Numbers
(H) _____ (W) _____

The scholarship request is for the registration fee only. The club player will be responsible for purchasing his or her uniform and tournament fees. A player does not return his or her uniform to the club. A recreational player must pay \$10 of his or her registration to cover the cost of the T-shirt. All scholarship recipients are required to volunteer in a 4 hour time slot at the Club tournament.

Please submit form to Team Manager/Coach

Confidentiality:

All scholarship information is for the sole purpose of helping the DCFC Scholarship Committee decide how to allocate its limited scholarship resources to serve those of greatest need. These scholarship requests are strictly confidential.

Family Financial Information

How much of the fees could you afford to pay? _____

Number of wage earners in household: _____

Please circle one: Employed full time part time unemployed

Number of persons living in household: _____ # of adults _____ # of children _____

Do you have children in college? _____

Do you qualify for free or reduced school lunch program? YES NO

Do you qualify for other public assistance? YES NO Food Stamps? YES NO

Please give reason for scholarship request:

Signature of parent/guardian:

For Club use only:

Date received: _____ Season/year: _____

Date reviewed: _____

Accepted: _____ Rejected: _____

Reason: _____