



## Hattiesburg Futbol Club (HFC)

### 2009-2010 HFC SCHOLARSHIP APPLICATION

The Hattiesburg Futbol Club (HFC) is pleased to offer a scholarship program for players who demonstrate the need for financial assistance in order to participate. Funds for this program are limited, so you will need to complete the following application in order to be considered. In addition to the application, you may also provide any additional information or documentation that you feel will aid the review board in determining eligibility. Please make sure you complete both pages of the application and sign where indicated.

Player's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Team: \_\_\_\_\_ Age Group: U-\_\_\_\_ Boy \_\_\_\_ Girl \_\_\_\_

Father's Name/Guardian: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail: Home \_\_\_\_\_ Work \_\_\_\_\_

Mother's Name/Guardian: \_\_\_\_\_

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

(If different than father)

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail: Home \_\_\_\_\_ Work \_\_\_\_\_

Does child qualify for reduced or free lunch at school: \_\_\_\_\_ (If yes, attach documentation)

Total number of children in family: \_\_\_\_\_

Total number of children registered at HYS/A/HFC: Recreation \_\_\_\_\_ Select \_\_\_\_\_

How much assistance towards HFC registration fees are you requesting? \_\_\_\_\_

(Scholarship is available only for registration fees)

**CONFIDENTIAL**

*Application for review by committee members only*



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Please state your reason(s) for requesting financial aid: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Family Member	Employment Income (take home)	Other Income *

\*(Other income: public assistance, alimony, child support, Social Security, etc)

If your request is granted, you will be required to donate labor hours to HFC to assist us in funding this program. Labor hours required will be based on amount of scholarship granted. Please indicate below which area(s) you would prefer to be assigned:

\_\_\_\_\_ Registration \_\_\_\_\_ Publicity/Fund Raising \_\_\_\_\_ Tournaments  
\_\_\_\_\_ Field/Equipment Maintenance \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Parent/Guardian Signature)

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