



## TSA SCHOLARSHIP PLAYER APPLICATION

Full Name: \_\_\_\_\_

Team: \_\_\_\_\_ Head Coach: \_\_\_\_\_

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

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

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Current GPA: \_\_\_\_\_

I am currently involved in the following community service work:

\_\_\_\_\_

In the space below, please tell us in your own words why you should be awarded this scholarship and what your future goals are.

Player Signature: \_\_\_\_\_



TUCSON SOCCER ACADEMY



FINANCIAL ASSISTANCE APPLICATION

Mail completed forms to Charlie Kendrick, 6933 E. Calle Neptuno, Tucson, AZ 85710

Please provide the information requested below. Incomplete forms will not be processed. All Information will remain confidential. (Note: A copy of pages 1 and 2 of your Federal Income Tax Return must accompany this form.)

Today's Date: \_\_\_\_\_ Player's Name: \_\_\_\_\_
Address: \_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Team: U- \_\_\_\_\_ Boys or Girls (Circle One) Team Coach: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Parent/Guardian's Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

What is the total annual income for your family? \_\_\_\_\_
What is your monthly mortgage or rent payment? \_\_\_\_\_
What is your monthly car payment(s)? \_\_\_\_\_
Please list the total of your other monthly payments \_\_\_\_\_

(Please use the reverse side to describe any special circumstances.)

Two-parent family? YES NO Number of children under age 18 living at home: \_\_\_\_\_
Number of children in college: \_\_\_\_\_ Number of children playing competitive club soccer: \_\_\_\_\_
Do you live outside the Tucson Metropolitan Area? Yes No
What team fundraising activities did you participate in last year: \_\_\_\_\_

Explain how you as a parent/guardian will be supporting team activities:
Team Manager \_\_\_\_\_ Travel Coordinator \_\_\_\_\_ Team Fundraising Coordinator \_\_\_\_\_
Team Treasurer \_\_\_\_\_ Phone Tree \_\_\_\_\_ Other (specify) \_\_\_\_\_

How much of the \$115 monthly fee can you afford to pay for your child's coaching at TSA? \_\_\_\_\_

All scholarship players must assist with the TSA Kick-Off Breakfast and the parents of scholarship players must assist with the TSA Tournament. Scholarship players are also required to participate in all team fundraisers for TSA. Failure to complete these obligations may result in players being suspended, and/or termination of TSA scholarship assistance.

By signing below, you confirm that all information provided above is accurate. Furthermore, you agree to contact TSA Scholarship Program Director Charlie Kendrick in a timely fashion if your financial situation changes during the 2009-2010 season.

Parent/Guardian Signature \_\_\_\_\_

Official Use Only: Received \_\_\_\_\_ Approved/Denied \_\_\_\_\_ Amount/Month \_\_\_\_\_

Pima County Junior Soccer League  
Financial Assistance Request Form

Club \_\_\_\_\_

Player ID# \_\_\_\_\_

Player name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Mailing Address \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Name \_\_\_\_\_

Please comment as to the need for assistance:

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

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Club Registrar Signature \_\_\_\_\_ Date \_\_\_\_\_

League Registrar Signature \_\_\_\_\_ Date \_\_\_\_\_

This completed form must be submitted with the registration.