



Middle Valley Soccer Academy Scholarship Application for Financial Aid

Middle Valley Soccer Academy (MVSA) offers a financial aid program to eligible players that can be applied towards a player's club fees. To be considered, this completed form must be received at least **one week prior** to the current season's registration deadline.

All information will be kept confidential. Please note that MVSA has a limited budget set aside to accommodate these requests; funds will be awarded based on need and eligibility.

All fields must be filled-in completely and form signed by parent or legal guardian. One form must be submitted for each player that financial aid is being requested for.

Level of financial aid requested? (circle one) 25% 50% 75% 100%

Player's Name:		DOB:	Gender: Boy Girl
Address:			
City:		State:	Zip:
Home Phone:		Mobile Phone:	
Mother's/Guardian's Name:			
Address:			
City:		State:	Zip:
Home Phone:		Mobile Phone:	
Email Address:		Receive Texts? Y N	
Father's/Guardian's Name:			
Address:			
City:		State:	Zip:
Home Phone:		Mobile Phone:	
Email Address:		Receive Texts? Y N	

List other children playing for MVSA:

Player's Name
1.
2.
3.
4.

Player Name: _____

Please list any circumstances or information that you would like the committee to consider when reviewing this request.

I attest that the information I have provided in this application is true and agree to provide any supporting documentation requested by MVSA to substantiate the review of this financial aid request. I understand that financial assistance is awarded for one season at a time. Further I agree that if I leave MVSA prior to the completion of the season for which assistance has been awarded, the full fee is due and payable.

Parent/Legal Guardian Signature: _____ Date: _____

Email completed application to mvsacademy@gmail.com.

For Internal Use Only

Date Received: _____

Approved Date: _____

Date Notified: _____

Amount Granted: _____