



Florida West F.C. Scholarship Application



Florida West F.C. will provide financial aid based on demonstrated need from the family and available funds to the club. Please note that all players must pay for their uniform and some level of registration fee, including those offered 100% scholarships.

Scholarship awards are revoked by the club upon request for a player release prior to completion of the full season. Any player awarded a scholarship will be required to complete full payment for respective program before a release is issued plus any admin fee as noted in the player code of conduct.

Additionally, all families who receive scholarships will be required to fulfill volunteer hours to the Club at a level that is defined by your scholarship award. If these hours are unfulfilled, the scholarship award will be adjusted and/or revoked accordingly.

Players Name:			Birth Date:		
Address:		City:		State:	Zip:
Mother's or Guardian's Name:		Mother's or Guardian's Home Phone:		Mother's or Guardian's Cell Phone:	
Father's or Guardian's Name:		Father's or Guardian's Home Phone:		Father's or Guardian's Cell Phone:	
Mother's or Guardian's email:			Father's or Guardian's email:		
Annual net family income:	How many family members are supported by this income?		What are your monthly liabilities?		
How many family members are enrolled in our soccer program?	If granted, would you be willing to donate your time as a volunteer (fundraising and other events)?		Was any family member awarded with a scholarship from our organization prior to this application?		
Use this space to justify your request for financial assistance. Your description must specifically demonstrate financial need.					

This Application should be accompanied by last year's tax return (first page of 1040 is adequate). I understand failure to provide required information will eliminate my application for consideration.

Signature

Date

This application must be emailed to Robert Peltram rpeltram@floridawestfc.com by the May 31st deadline