



Scholarship Request Form

Scholarships are available for a single season registration only. The cost per player for each season is \$110.00. In order to provide scholarships for the most children possible, it is requested that you make a minimum payment towards the registration costs. Please fill out this request form and submit it at the time of registration to president@cssoccer.com or at an in-person registration event.

Player Name: _____

Gender: Boy / Girl

Age Group: _____

Parent/Guardian: _____

Address: _____

Phone Number: _____

Reason for Request (required): _____

I am able to volunteer at an event if needed: Yes No

I can contribute \$ _____ towards my child's registration.

Parent Signature: _____

Date: _____

Amount Paid: \$ _____

Scholarship Amount: \$ _____

Board Member Approval: _____

Remarks: _____