

# Fife Milton Edgewood Soccer Club

## SCHOLARSHIP ASSISTANCE FORM



Players Name \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Parent or Guardian \_\_\_\_\_

Email \_\_\_\_\_

Reason for scholarship assistance request -

\*Rec players we ask that you pay **\$40.00 for each player** you are asking assistance for, to cover insurance cost.

\*For select players it will be **\$140.00 for each player** you are asking assistance for to cover insurance & for a reduced club fee.

See our website for club fees under the Rec or Select tab.

\*FMESC follows Fife School District Free/Reduced Lunch guidelines. **Please provide documentation of free/reduced lunch or proof of income** (i.e. a paystub, an unemployment check, a DSHS statement, a tax return, etc)

Once proof of income has been verified, all documents will be destroyed. Complete confidentiality will be maintained as to documentation supplied and the identity of the family/child receiving the scholarship.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar/Treasurer \_\_\_\_\_ Date \_\_\_\_\_

Please email this form along with supporting documents to [treasurer@fmesoccer.org](mailto:treasurer@fmesoccer.org) and [registrar@fmesoccer.org](mailto:registrar@fmesoccer.org)

If you prefer to mail documents our mailing address is

FMESC

PO Box 1408

Milton, WA 98354