



OFC SCHOLARSHIP APPLICATION

OFC is pleased to offer a scholarship program for players who need financial assistance. Scholarship funds are limited and based on financial need. The following application will have to be completed along with documentation (W-2, payroll stub, etc.) that you feel will help the review board determine eligibility. Please make sure all areas are completed legibly and the application is signed.

Applicant Information		
Player's Name:		Parent's Name:
Street Address:		
City:	State:	Zip Code:
Phone:	Email:	Birth Year:

Please list any other children playing with OFC:

Name: _____ Birth Year Team: _____ Boy or Girl
Name: _____ Birth Year Team: _____ Boy or Girl

How much assistance towards OFC participation fees are you requesting? \$ _____

Please state your reason(s) for requesting financial aid:

Income (Please include BOTH parent's incomes):

Mother: \$ _____ Father: \$ _____

(Please attach documentation to support)

Signature: _____ Date: _____

CONFIDENTIAL
APPLICATION FOR REVIEW BY COMMITTEE MEMBERS ONLY