



## San Clemente Girls Softball Scholarship Program

**GENERAL:** It is the goal of San Clemente Girls Softball to present scholarship assistance to players in financial need. The SCGS Board of Directors will review the scholarship requests each year and award the scholarships based on available funds.

**INTENT:** The SCGS Scholarship intent is to provide the needed financial assistance to players that would otherwise not be able to play.

**GUIDELINES:** Below are the guidelines required by the family of the player receiving a scholarship from SCGS:

- There is a minimum league fee that will be required and not a 100% covered fee. This administration fee is \$25.00
- You will agree to assist in working the league snack bar for a minimum of 10 (ten) hours which may include time during Opening/Closing Day, Regular Season, or Memorial Day Tournament.
- Applicant has not been on scholarship for more than 3 consecutive seasons.
- Applicant must not have a scholarship from any other organization, be playing SCGS in conjunction with any "travel" team in softball or another sport, or paying for private outside softball lessons (ie. hitting, pitching, or catching).
- If found to have participated in any of these activities while under scholarship with SCGS, the league may revoke the scholarship and requirement payment immediately or be removed from the team.

**APPLICATION:** This scholarship is awarded to any player who is seeking to register for the San Clemente Girls Softball League. Please fill out the following information.

|  |                            |
|--|----------------------------|
| Parents: _____   | Date: _____                |
| Player: _____  | School: _____ Grade: _____ |
| Address: _____   | Phone: _____ Email: _____  |
| Player Experience: _____   |                            |
| Years/Seasons of Prior Scholarships with SCGS: _____   |                            |
| Please provide a personal statement describing the circumstances leading to scholarship request: |                            |
| _____  |                            |
| _____  |                            |
| _____  |                            |
| By signing I agree to the terms above:   |                            |
| Signature: _____   | Date: _____                |

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