

ATHENS LITTLE LEAGUE

Full and Partial Scholarship Request Form

Athens Little League (ALL) will not deny any child a chance to play baseball or softball due to financial hardship. Full or partial scholarships are available. Complete and return this form and the required information to Athens Little League by e-mail to treasurer@athenslittleleague.org or by mail to Athens Little League, Attn: SCHOLARSHIP, P.O. Box 6122, Athens, Ga. 30604.

SCHOLARSHIP ELIGIBILITY REQUIREMENTS

To be eligible for a full and/or partial scholarship, you must provide Athens Little League the following:

- Complete a Player Registration Form.
- Complete fully a Scholarship Request Form with an explanation of the financial hardship.
- Provide proof of residency indicating that the player(s) reside(s) within the Athens Little League boundary (or provide a request in writing for waiver of the residency requirement).
- Provide Proof of age indicating that the player(s) meet(s) Little League requirements for participation.
- Provide copy of a current ACC Leisure Services Scholarship Card, approval for Free & Reduced Price School Meals and/or similar documentation.
- Complete Athens Little League Volunteer Application for parent or legal guardian.

Parent/Guardian's First Name	Parents/Guardian's Last Name	Player(s) Name(s) & Date(s) of Birth

Home Address	City	State	Zip

Daytime Phone	Evening Phone	Mobile Phone	Email Address

How much can you afford to pay now? \$ _____ and/or later? \$ _____

Amount of scholarship requested: Full \$ _____ Partial \$ _____

Has the player(s) ever received scholarships from another resource? If yes, please list resource & year? _____

FINANCIAL HARDSHIP EXPLANATION (Use back of page, if needed, or attach separate sheet):

I, as the Parent or Legal Guardian of the player(s) named above, attest to the truth for the above information to the best of my knowledge. I have read and agree to the Athens Little League Scholarship Fee Program Guidelines.

Parent(s) or Guardian(s) Signature(s)

Date

FOR ATHENS LITTLE LEAGUE USE ONLY

Date Reviewed:

<input type="checkbox"/> Full Scholarship Granted	<input type="checkbox"/> Partial Scholarship Granted	<input type="checkbox"/> Request Denied
Amount: \$ _____	Amount: \$ _____	Contact info@athenslittleleague.org