

## Richmond Grizzly Lacrosse Club Scholarship Program

The Richmond Lacrosse Club Scholarship Assistance Program (Scholarship Program) is designed to assist families with financial hardships the opportunity for their player to participate. Participation in the Scholarship Program must be requested by the parent or guardian of child and must be approved by the Richmond Lacrosse Club Board of Directors. The Richmond Lacrosse Club program is a 501c3 organization (not-for-profit) and does not discriminate on gender, race, or religious affiliation.

To make payment arrangements contact richmondgrizzly@gmail.com. Rather than offering full scholarship we would like to offer partial scholarships to help out more families in need this season. Awards of assistance are NOT guaranteed to every applicant.

*If you are in need of help with gear ONLY, please contact us at richmondgrizzly@gmail.com.*

### Requirements for eligibility:

- **Commitment to attend a minimum of 80% of scheduled practices and games.**
- Participation by a family member with volunteer opportunity during the scholarship season.
- A parent guardian, or head of household must complete application with all requested information. (Incomplete applications will not be considered)
- Commitment to volunteer 10 hours throughout the season AND/OR sell more than the allotted 10 raffle tickets
- Participation is required in any fundraisers offered by the Richmond Grizzly Lacrosse Club.

**\*\*\* Approval process of a registration scholarship does not register the participant for Grizzly Lacrosse. You will still need to complete all registration documents.**

Today's Date: \_\_\_\_\_

Player Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

What is the maximum amount you can pay towards registration fee? \_\_\_\_\_

Is a payment plan an option instead of scholarship? \_\_\_\_\_

If awarded with a scholarship, in what capacity would you be willing to volunteer? \_\_\_\_\_

Please explain your request/circumstance for scholarship for this upcoming season?

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**Agreement:**

I certify that all of the information on this form is true and correct. I understand that my child(ren)'s participation in this program requires a commitment to attend minimum of 80% of the scheduled practices and games. I agree to participate in any volunteer opportunity request of me.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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***For Richmond Grizzly Lacrosse Club Use Only***

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Amount, if any Awarded\$ \_\_\_\_\_

\_\_\_\_\_  
Board Signature

\_\_\_\_\_  
Print Name/Position

\_\_\_\_\_  
Board Signature

\_\_\_\_\_  
Print Name/Position