



SCHOLARSHIP REQUEST FORM

In order to consider your request for scholarship, we ask that you complete this form for our records prior to the start of the season. The request should be email to webmaster@fairfieldwildcats.com or mail to:

Fairfield Wildcats
PO Box 131
Fairfield, CT 06824

Player Name: _____

Player Date of Birth: _____ Player Grade (17/18): _____

Scholarship Request is for: Tackle Flag Cheer

Parent Information:

Guardian 1 Name: _____

Guardian 2 Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Email Address: _____

Amount of Scholarship Requested: \$ _____ Partial Scholarship Full Scholarship

Brief Reason for Scholarship Request:

For Wildcats Admin Use:

Scholarship Approved by: _____ Date: _____

Amount Granted: _____ Full Partial