STOCKTON LACROSSE CLUB SCHOLARSHIP APPLICATION

Date :		
First Name:	Last Name	
Team:		
registration cost to play wit grade point average and d honoring the rules of the g	our community we are able to provide scholarship assistance for the the Stockton Lacrosse Club. Each applicant should maintain a reasonable play good citzenship on and off the field. A commitment to attending practume, respect for your teammates, opponents and coaches will be expected that. Parent support is important to the success of the player and the programs.	tice d
 A letter of recommendat 	rements on from a teacher, counselor or principal of your school will need to be ment from the player in 150 words or less to the following questions: f paper if necessary)	
What would it mean to you What do you hope to gain	o play lacrosse? s a player on a Stockton Lacrosse Team?	
	parent/guardian without providing financials why a full or partial sary for your child to play lacrosse this season.	