



2011 SUPERIOR MUSTANGS FOOTBALL / CHEERLEADING SCHOLARSHIP REQUEST

Participant's name: _____

Scholarship requested: Please check one: Football _____ Cheerleading _____

Superior Mustangs offers financial assistance in cases of special need via partial and full scholarship basis. The available funds are limited so you are asked to request only the amount that will enable your son or daughter to participate in the Mustang activities.

Amount requested \$ _____

Reason for scholarship request (please continue on back of sheet if needed)

Parent/Guardian Information:

Name(s): _____

Home phone: (____) ____ - ____

Work/cell phone: (____) ____ - ____

Note: Parents of scholarship players are expected to participate in standard volunteer activities as requested by the team coach or team mom. Failure to do so could result in forfeiture of future scholarship awards.

For SMYF Use Only

Approved by: _____ Date: _____
President, Superior Mustang Organization

_____ Date: _____
Vice President, Superior Mustang Organization