



Application for Scholarship/Payment Plan/Multi-child Discount

Player Name: _____

Date of application: _____ Season: 2009-10

Team of applicant: _____ Age level: _____

Address: _____

City/State/Zip: _____

School: _____ Grade: _____

GPA: _____ Phone: _____ Email: _____

Parent or Guardian: _____

Address if different from above: _____

Phone: Home _____ Work: _____ Email: _____

Place of employment: _____

Parent or Guardian: _____

Address if different from above: _____

Phone: Home _____ Work: _____ Email: _____

Place of employment: _____

Total family annual income: _____ Other HSC players: _____

Family members at home: _____

Requesting: Partial Scholarship Full Scholarship Extended Payment Plan Multi-Child Discount

Please describe your situation (use back of page if necessary):

I understand that this application for a scholarship, payment plan, or multi-child discount covers club dues only. The player/family is responsible for the full and timely payment of all other fees associated with participation such as travel, lodging, uniforms, tournament fees, etc.

Parent/Guardian Signature: _____

Parent/Guardian Signature: _____

Please return completed form to **Heartland Soccer Club, PO Box 11127, Cedar Rapids, Iowa 52410, prior to Aug. 1st 2009.** You will be notified of scholarship status no later than September 1st, 2009.

Heartland Soccer Club does not discriminate against race, nationality, gender or religion.