

Angleton Little League Scholarship Program

Angleton Little League provides registration fee scholarships to children, who without this financial assistance would not be able to participate in one of the Angleton leagues. The scholarship program focuses on providing opportunities for youth to participate in recreational team sports because of the physical, mental, and character-training benefits these programs can provide.

Requirements for eligibility:

- Athlete must be age 17 or younger.
- Commitment to attend a minimum of 75% of scheduled practices and games.
- Participation by a family member in at least 3-4 league activities throughout the season **(Field work days, concessions, field marking before games, etc.)**
- Application must be completed by a parent, guardian, or head of household, with all requested information provided. (Incomplete applications will not be considered.)
- Application must first be approved by the league before consideration for assistance.

Priority will be given to eligible youth meeting one or more of the criteria below:

- Member of a multi-child family (only one scholarship per family permitted).
- Living in a single parent home (only one scholarship per family permitted).
- Receiving assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC, etc.
- (Must provide written documentation of participation in these programs to receive priority status)
- Written recommendation by school representatives, social workers, youth community center workers, or other social services representatives.

**Approval of a registration scholarship does not register the participant in the activity. Athlete must still register with the league. **

Angleton Little League

REGISTRATION SCHOLARSHIP APPLICATION

All information on form must be completed. Individual application required for each child:

Athlete's Name: _____ Age: _____ Male/Female ___ Birthdate: _____

Address: _____

Street City State Zip: _____

School Athlete Attends: _____ Grade: _____

Athlete lives with: () Both Parents () Mother () Father () Other _____

Amount of scholarship requested: Full \$ _____ Partial \$ _____ amount requested: _____

(Scholarship Program limits: Up to \$130.00 per child; Maximum 1 scholarship per family)

PARENT / GUARDIAN INFORMATION:

Has this athlete ever received a scholarship from Angleton Little League? () Yes () No

Father's Name: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Mother's Name: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Guardian's Name: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Season for scholarship request: Spring - Year: _____

CONSENT TO RELEASE INFORMATION

I understand that my signature authorizes Angleton Little League to obtain verification of all information on this application and that additional information may be necessary for approval of this application. I certify that all of the information on this form is true and correct.

Parent/Guardian Signature: _____ Date: _____

Volunteer Position: () Concession () Field Maintenance () Field Marking () Closing Cleanup

League Representative Signature: _____ Date: _____