

**Grosse Pointe Soccer Association**  
**SCHOLARSHIP RULES AND APPLICATION**

The Grosse Pointe Soccer Association (GPSA) offers a limited number of scholarships for registration fees. Scholarships are offered taking into account the needs demonstrated and the financial ability of GPSA to fund scholarships. Scholarships are available both to house and travel registrants based on financial need, not playing ability.

Scholarship decisions are made by an officer of GPSA. All information provided is held in strict confidence and is not generally to GPSA or its Board of Directors.

Scholarships are for **registration fees only**. Other team fees (for uniforms, trainers, etc.) or costs of play (shoes, ball, etc.) are not included. Scholarship awards are made for each season (Fall and Spring) separately. **A new application must be made each season.**

**Scholarship applications are due with the registration form for the applicable season.** Application for a scholarship does not affect a player's selection for GPSA travel teams. However, **a player's acceptance of a travel team position may not be made subject to the award of a scholarship without the prior consent of the coach or manager of the affected team and GPSA's Vice President.**

Donations for scholarship purposes are also welcome. GPSA is a tax exempt 501(c)(3) Michigan non-profit corporation.

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**The undersigned parent/guardian submits this Application to the Grosse Pointe Soccer Association for consideration for a registration fee scholarship for the /check one/ \_\_\_\_\_ Fall \_\_\_\_\_ Spring season for 200\_\_\_\_\_:**

Player(s) Name(s): \_\_\_\_\_

Birthdate(s): \_\_\_\_\_

Player(s)' current division (U-10, etc.) and team name: \_\_\_\_\_

Name of Parent(s) or Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Please describe the circumstances which give rise to the need for a scholarship:

Please check if any of the following apply:

\_\_\_\_\_ Family income qualifies for earned income credit on latest federal tax return

\_\_\_\_\_ Children eligible for free or reduced school lunch program

\_\_\_\_\_ Family or child on other public assistance

\_\_\_\_\_ No employed wag-earner in household

\_\_\_\_\_ Single parent household

Have you received scholarships in prior seasons from GPSA? \_\_\_\_\_ yes \_\_\_\_\_ no

(If yes, season(s) received: \_\_\_\_\_)

GPSA's teams and programs need the assistance of volunteers for various purposes. While your ability to volunteer will not affect your eligibility for a scholarship, your offer of assistance would be appreciated:

\_\_\_\_\_ I would like to volunteer; please call with any opportunities to do so.

\_\_\_\_\_ I might be able to volunteer; please call with further details.

\_\_\_\_\_ I am unable to volunteer

**The undersigned parent/guardian represents that the information set forth above is accurate and complete. I acknowledge that misrepresentation may result in my child's expulsion from GPSA and may subject me to civil of criminal liability.**

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Parent/guardian signature

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Date of signature