

Nevada County Girls Softball Association

Scholarship Request

Please complete this form to apply for a payment plan or scholarship and submit your completed form to board@ncgsa.org. All information provided will be kept confidential and will only be used for making decisions regarding financial assistance.

Parent/Guardian Name: _____

Phone: _____ Email: _____

Player Name: _____

Player Age Division (check one):

6U 8U 10U 12U 14U 16U

Request (check one):

Payment Plan

I will pay the full cost of registration (including raffle tickets*) on a payment schedule.

Partial Scholarship

I will pay the cost of the uniform, player insurance and raffle tickets*.

Full Scholarship

I will pay the cost of the raffle tickets*.

Please explain the reason for your request:

Parent/Guardian Signature

Date

*Raffle tickets are purchased during registration. Players may choose to keep the raffle tickets or sell them to family, friends and neighbors. Families keep all monies earned from selling raffle tickets.