



## Brazos Little League Scholarship Program

### Introduction

Brazos Little League believes it is our obligation to provide each child who wishes to play baseball or softball the opportunity to do so regardless of financial circumstances.

The Brazos Little League Scholarship Program exists to provide assistance, based on need and ability, with the costs of baseball and softball. The scholarships available will Pay:

- Full registration fees, or
- Partial registration fees

### Scholarship Eligibility Requirements

Those seeking a scholarship must explain the nature of the hardship and/or provide documentation supporting the request. Specifically, to be eligible for a scholarship the applicant must provide a detailed explanation of the financial hardship with supporting documentation such as proof of participation in an assistance program which includes, but is not limited to: SNAP, SSI or NSLP.

### How to Apply for a Scholarship

The scholarship request process is very straightforward. To ensure proper due diligence, every scholarship request is examined and assessed on its own merit.

Email your completed application and applicable documents to [treasurer@brazoslittleleague.com](mailto:treasurer@brazoslittleleague.com)

### Terms and Conditions

If the scholarship request is approved, the following terms and conditions will apply:

1. A registration form must be completed for the player.
2. The player must meet all residence and proof age requirements (all required documents must be submitted prior to or with the scholarship application)
3. The scholarship covers the registration fees only for the current season. (May reapply for future seasons)
4. Parent or legal guardian agrees to “re-pay” the League through volunteering for Fundraising, League functions and activities (i.e. helping with Opening Day, working the snack bar, helping with teams, field maintenance, etc.) if so requested.

To apply for partial or full scholarships please complete this application and submit with documentation, to the scholarship committee at [treasurer@brazoslittleleague.com](mailto:treasurer@brazoslittleleague.com)

**Submitted information will be kept strictly confidential**

## Scholarship Recipient Information:

Players Name:	
Mailing Address:	
City, State, Zip:	
Phone:	
E-mail:	
Age:	
Grade:	
School Name:	

### Applying for (amount):

Full Scholarship:	\$
Partial Scholarship:	\$

Please provide a short explanation below.

Hardship Explanation:

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By signing this document, you agree to have read all terms of the application for the scholarship, including requirements and expectations that come with the granting of this scholarship and that all said information is true.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Don't forget to include/attach all required documents with this application!

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Scholarship Committee:  Approve  Disapprove

Date: \_\_\_\_\_ Signature: \_\_\_\_\_