

Application for Scholarship  
and Financial Aid



Player Name: \_\_\_\_\_ HS Grad Year: \_\_\_\_\_ Date: \_\_\_\_\_

**Please select the program below which you are requesting aid for:**

- |                       |                          |                      |                          |
|-----------------------|--------------------------|----------------------|--------------------------|
| Tenacity Bay Area:    | <input type="checkbox"/> | Tenacity Houston:    | <input type="checkbox"/> |
| Tenacity Portland:    | <input type="checkbox"/> | Tenacity Sacramento: | <input type="checkbox"/> |
| Tenacity Utah Mamaci: | <input type="checkbox"/> |                      |                          |

Team Name (i.e., Tenacity Bay Area Elite 2024): \_\_\_\_\_

Summer Camp (note site): \_\_\_\_\_

Summer League (note region): \_\_\_\_\_

Fall Ball (which region): \_\_\_\_\_

Travel (which expenses?): \_\_\_\_\_

**Family Information**

Guardian 1 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Guardian 1 Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Guardian 2 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Guardian 2 Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Financials**

Total Household Income: \_\_\_\_\_ Total # of People Living in Household: \_\_\_\_\_

Estimated Program Cost: \_\_\_\_\_ Amount You Can Contribute: \_\_\_\_\_

Are you willing to volunteer your time (rides for players, scorekeeper at tournaments, other)? Please specify:

\_\_\_\_\_

Any additional information you would like us to know?: \_\_\_\_\_

\_\_\_\_\_

