



**Gulf Coast United Futbol Club**  
Scholarship Review Board  
P.O. Box 391  
Gulfport, MS 39502

## **2010-2011 SCHOLARSHIP APPLICATION**

(Incomplete forms will not be considered)

The Gulf Coast United Futbol Club, Inc. is pleased to offer a scholarship program for players of demonstrated ability who need financial assistance in order to participate. Please complete the following application, along with appropriate signatures, and provide any additional information on documentation that will aid the review board in determining eligibility.

Player's Name \_\_\_\_\_ Team/Age Group \_\_\_\_\_

Birthdate \_\_\_\_\_

Father's Name/Guardian \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Name/Guardian \_\_\_\_\_ E-mail \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

(if different than father)

City \_\_\_\_\_ Zip \_\_\_\_\_

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How much assistance towards GCUFC training fees are you requesting? \_\_\_\_\_  
(scholarship is available only for Training fees)

Please state your reason(s) for requesting financial aid \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Family Member and Income from Work and Other Sources\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*(Other income: public assistance, alimony, child support Social Security, etc)

Would you be willing to volunteer for:  
\_\_\_Tournaments    \_\_\_Publicity    \_\_\_Fields/Equipment    \_\_\_Other

\_\_\_\_\_  
(Parent/Guardian Signature)

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