



Carlsbad Wave F.C. **Scholarship Program**

Our scholarship program is intended to help those families that cannot afford the full registration fees for their children to play soccer. We provide a reduced rate in addition to requiring you to volunteer in one of our various positions where we are in need of help. Please complete the following application to help us decide if you qualify for a scholarship. Applications will not be processed without the income resources of the family. Scholarships are partial. The remainder must be paid or sponsored.

Below are the volunteer categories to choose from:

1. Parent Volunteer

Parents may volunteer for club activities such as Opening Day, Sponsor Coordinator, Phone Caller, Translator, etc.

2. Referee

Being a referee is another way to earn money towards your scholarship and earn extra money while increasing your soccer knowledge. The club will have you trained and assign you to Carlsbad Wave Soccer games.

3. Coaching Assistant

Coaching Assistant for all the recreational teams and micro-soccer is another way you can fulfill your obligation to the club. The player will be assigned by the coaching staff to a needy recreational team.

3. Field Preparation

Prepare the field on game day by assembling goals and placing corner flags. Repair work on fields on Friday afternoons.

In addition, it is required that each scholarship player must provide a minimum of 10 SPONSOR LETTERS (located on our web site) that are addressed to their families, friends or businesses that will be mailed by your team manager with the Carlsbad Wave F.C. P.O. Box being the return address.

Carlsbad Wave Soccer P.O. Box 71 Carlsbad, CA 92018
760-434-5600 www.carlsbadwavefc.com

CWFC Application for Scholarship (Confidential)

Player and Parent information:

Player's Name:		
Parent's Name:		
Coach's Name:		
Address:		
Email Address:		
Phone Numbers:	Home:	Cell:
Dependent's Name(s):	Dependent's Date of Birth:	School Child Attends:
1.		
2.		
3.		
4.		
5.		
Number of family members residing at residence:		

Income Resources of Family (Report total annual income for each item listed below.) You must attach a copy of the following with your application:

Source	Amount	Verification (ATTACH COPY)
a. Money, Wages or Salary	\$	<i>Current Check Stub</i>
b. Social Security	\$	<i>Current Check Stub</i>
c. Public Assistance/Welfare	\$	<i>Notice of Action from Dept of Social Services</i>
d. Unemployment/Disability	\$	<i>Current Check Stub</i>
e. Alimony	\$	<i>Current Check Stub or Court Decree</i>
f. Child Support	\$	<i>Current Check Stub or Court Decree</i>
g. Other Income	\$	

GROSS ANNUAL INCOME (TOTAL)\$_____

I affirm to the best of my knowledge that the above statements are true.

Signature_____ Relationship to Child_____

Date_____

What volunteer position do you choose to accept?_____

For Office Use Only:

Amount Rewarded: _____ Date: _____ Reviewed By: _____