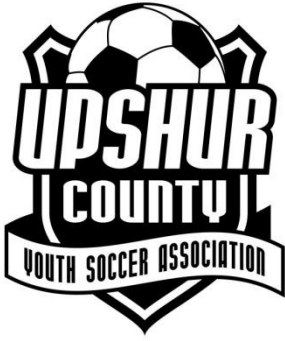


Date: \_\_\_\_\_



**UPSHUR COUNTY YOUTH SOCCER ASSOCIATION**

**P.O. Box 512, Gilmer, TX 75644**

**President: Poppy Elwell - poppyelwell@ucysa.com**

**SCHOLARSHIP FORM**

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

How many in your family plan to play soccer?: \_\_\_\_\_

List the primary reason(s) you are applying for a scholarship:

Essay Response: *In **150 words or less**, tell us know about yourself and why you would like a scholarship to play in the UCYSA.*

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

Receiving Board Member: \_\_\_\_\_