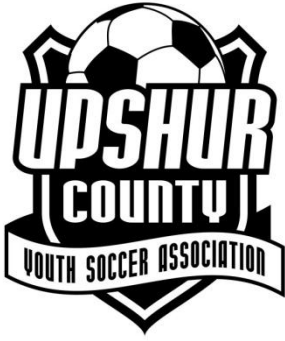


Date: _____



UPSHUR COUNTY YOUTH SOCCER ASSOCIATION

P.O. Box 512, Gilmer, TX 75644

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: _____