



**Anderson High School Men's Lacrosse**

**Scholarship Application**

[www.andersontrojanlacrosse.com](http://www.andersontrojanlacrosse.com)

Player Name: \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Address: \_\_\_\_\_ zip \_\_\_\_\_  
Cell: \_\_\_\_\_ e-mail \_\_\_\_\_ Grade: \_\_\_\_\_ Student ID: \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
e-mail \_\_\_\_\_

Father/Guardian \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
e-mail \_\_\_\_\_

Scholarship Request: **DUE OCTOBER 31, 2011**

Please write a summary of your financial needs for the Lacrosse season. The board will consider your request on a case-by-case basis. The Fall Ball fee is \$150. The Spring Ball fee is \$800. New Player uniform fees are not included.

Application Requirements:

1. Student must be enrolled in Anderson High School for the current academic year or otherwise qualified to participate in Anderson High School Lacrosse Program as a player.
2. Student must meet academic requirements to participate in Anderson High School Lacrosse Program.
3. Student must file a statement of financial need, and provide other reasonable information required to make determination of financial need.
4. **Mail application to:** AHS Men's Lacrosse, 3571 Far West Blvd. #190, Austin, TX 78731.

1. Scholarships awarded will be annual scholarships for the academic year of the application only.
2. All awards and amounts are at the sole discretion of Anderson HS Men's Lacrosse Boosters Inc.
3. All awards are dependent on financial need and the availability of scholarship funds.
4. Anderson High School Lacrosse Boosters Club reserves the right to discontinue this program at any time.

I certify that all information in this application packet is true to the best of my knowledge.

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