

TC Basketball League Sponsor Application Season: _____

Athlete's Name: _____ Age _____

Parents Name: _____

Street Address: _____ City _____

Telephone: _____ Email: _____

Name Of School You Attend: _____

Have you played in this League before: Yes/No Years attended: _____ DOB: _____

Employment Information: _____

Address: _____ Phone: _____

Annual Household Income: _____

Unfortunately there can only be one scholarship per family. We also need to limit the requests to no more than once a year (per 4 seasons) to insure everyone in need has the opportunity to receive a scholarship. Please explain reason for request:

Board Approved Full _____ Partial _____