



Player Scholarship Request Form

Scholarships made possible by the generous support of the **UPS Store** in La Crosse.



Date_____

Name of Player_____Age Level_____

Name of Parent(s)_____

Address_____

City, State, Zip_____

Email 1_____Email 2_____

Phone 1_____Phone 2_____

Scholarship Request and Rationale

Please complete form, scan and email to SYB President Matt Thornton at matt@jaybuckley.com or send to or drop off at Shelby Town Hall, 2800 Ward Avenue, La Crosse, WI 54601.

SYB Office Use Only

Approved By_____Date_____

Notes_____