



Sprague LL Scholarship Request Form

Parent Name: _____ Phone: _____ Email: _____

Child Name: _____ Division: T-ball A AA AAA Maj Int JR SR
(Circle one)

Does your child qualify for free or reduced lunch at school? Yes No
(Circle one)

Please provide a brief description of your circumstances:

Did you receive a scholarship last year? Yes No
(Circle one)

If yes, please describe your volunteer activities: _____

If you are granted a scholarship this season, please understand that you or a family member will be asked to serve at least ten (10) working hours towards baseball/child-related activities. Examples include Concessions, pre-game field prep, post-game raking of infield, Field Day work, outfield fence setup/teardown or helping on a committee in support of League operations. **Please note areas in which you intend to help this season:**

Every league has a need to seek volunteers to help with their operations. Working with families to have parents or guardians volunteer or provide in-kind support in exchange for a child's participation fee can help provide much-needed services to the league

At no time should payment of any fee be a prerequisite for participation in the Little League program, and it is important for local leagues to find a way to ensure that every child has the opportunity to be a part of the program, no matter their family's financial situation. The most important thing to remember is that the Little League experience is meant to be enjoyed by everyone!

-----For internal use only-----

Amount Approved: _____

Approval (Treasurer): _____

Approval (Vice President): _____

Approval (President): _____

Date: _____