

Dublin Little League Scholarship Request Form



Parent(s) Name: _____

Player(s) Name: _____

Address: _____

Phone: _____

Email Address: _____

We ask families of scholarship recipients spend 6 hours volunteering with the league for half scholarship or 12 hours volunteering for full scholarship. All hours must be worked during the year of that registration. Below are some of the volunteer positions available, please circle which ones you are interested in:

- | | | | | |
|---------------|------------------|-------------------|----------------|-------------------|
| * Snack Bar | * Home Run Derby | * Jamboree | * Umpiring | * Field Prep |
| * Team Parent | * Manager | * Assistant Coach | * Scorekeeping | * Poker Night |
| | | | | * Fireworks Booth |

Scholarship Request: Full: _____

Half: _____ Dublin Little League will contact you to discuss payment plan details. Full balance must be paid before the first game of the season.

Reason for requesting the scholarship(s):

Parent Signature: _____ Date: _____

President Signature: _____

Player Agent Signature: _____

All scholarship requests should be submitted to the player agent at playeragent@dublinll.org and to the president at president@dublinll.org. Scholarship information is discussed and only known between the Requestor, Player Agent, League President and the League Treasurer. Scholarship information will not be discussed or made known to any other individuals in Dublin Little League, including other board members.

Once scholarship paperwork is submitted and approved please contact the League Treasurer at treasurer@dublinll.org to complete the registration process. Any questions during the process please contact either of the above named officers for help or questions regarding your request.