



**YORKVILLE YOUTH ATHLETIC ASSOCIATION  
PLAY IT FORWARD SCHOLARSHIP PROGRAM**

**CHILD LAST NAME** \_\_\_\_\_, **FIRST** \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**PARENT #1 INFORMATION**

Last Name: \_\_\_\_\_, First \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

**PARENT #2 INFORMATION**

Last Name: \_\_\_\_\_, First \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

**PROGRAM INFORMATION**

A scholarship is requested for (league/program name): \_\_\_\_\_

Cost of the league/program: \$ \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

**RECOMMENDATION**

- Submit a letter of recommendation/reference for child from a teacher, social worker, clergy, youth center worker, or any other non-related adult who believes that child will benefit from participation in one of our programs.

**REQUIRED DOCUMENTS**

Submit **ONE** of the following proofs of income (*Please DO NOT include originals of any documentation, as they will not be returned*):

- Front page of most recent Federal 1040 tax return, either joint or for each parent (preferred form of income verification), or
- Social Security income benefit statement, or
- Unemployment benefit statement, or
- Disability income benefit statement, or
- Public assistance income benefit statement.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

FOR OFFICE USE ONLY: \_\_\_\_\_