

Youth Sports Fund of Grayson County Scholarship Application



The Youth Sports Fund of Grayson County encourages and supports youth participation in recreational sports and making these opportunities available to any player, regardless of their financial situation. The Youth Sports Fund of Grayson County offers scholarships for families who need financial assistance for children to play sports. This fund is offered through a partnership between Central Kentucky Community Foundation, Grayson County Healthcare Foundation, and Grayson County Moose Lodge.

*Please fill out this form completely and submit to our office by the following deadline:
Football & Cheerleading— July 29*

Youth Sports Scholarship Guidelines:

- Applications are accepted from youth living in Grayson County who plan to play recreational Baseball, Basketball, Cheerleading, Football, Soccer, Softball, or Tennis.
- Scholarships may cover all or a portion of registration fees and/or sports equipment.
- Scholarships will be paid directly to the sports league, not to the individual participants.
- Scholarships are for one season and awarded based on need.
- Funding is limited, and scholarships are not guaranteed to all applicants.
- Travel expenses and extra “team” tournaments or expenses are not covered.
- Children of CKCF and GCHF staff and Board Members are not eligible for scholarship assistance.

Applications can be submitted at:

Leitchfield Parks and Recreation

Leitchfield City Hall

515 South Main Street

Leitchfield, KY 42754

Or

Central Kentucky Community Foundation

200 Jim Owen Drive

Elizabethtown, KY 42701

270-737-8393

Or by email to: info@ckcf4people.org



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Player Information

Name	Age	School	Grade
Home Address		City/ Zip	
Sport your child will be playing:		Cost of League: \$	
League Name:			
Has your child played sports before? Y / N If yes, what sport/league: _____			
Has your child been funded through the Youth Sports Fund of Hardin County previously? Y / N			

Parent/Guardian Information

Name	Phone Number	Email
Address (if different from player)		Place of Employment
Name	Phone Number	Email
Address (if different from player)		Place of Employment

Please share why you are applying for financial assistance. (Attach additional page(s) if needed)

Why would you like your child to play sports? _____

How are you financially contributing to the cost? _____

Assistance Requesting: ☐ 50% ☐ 100% ☐ Other _____ ☐ Equipment

Please list equipment needs if checked: _____

Do you have transportation – time and vehicle to get your child to games/practice? Y / N

You must report income for all household members: this includes earnings from work, income from public assistance/child support/alimony, pensions/retirement, and all other income.

Family **annual** income: \$ _____ # of adults in household _____ # of children living at home _____

I understand the practice and game time commitment for my child to participate and agree to ensure my child participates fully in the sports program.

Signature of Parent/Guardian _____ Date _____

How did you hear about the scholarship program? _____