



## DEERFIELD PEGASUS SOCCER CLUB SCHOLARSHIP POLICY

**Objective:** Deerfield Pegasus Soccer Club (Pegasus) strives to keep soccer affordable and wishes to reduce the economic barriers of playing soccer. As such, as long as funds are available, Pegasus will make scholarships available to deserving players and their families.

**Program Name:** The official name of this scholarship program shall be the Deerfield Pegasus Soccer Club Scholarship Fund.

### **Deerfield Pegasus Soccer Club Scholarship Fund Overview:**

- Scholarship amounts awarded will be based on the needs of the family.
- Scholarships will be reviewed on a yearly basis.
- Deerfield Pegasus Soccer Club has asked Family Service: Prevention, Education & Counseling NFP to assist in determining whether a family is in need of a scholarship. Applications should be sent directly to them. They will make a determination and notify the club treasurer. The financial information on the application form will not be shared with any club official.

**Administration:** This scholarship program will be under the direct supervision of the Pegasus treasurer. The determination of a family's financial need will be made by Family Service: Prevention, Education & Counseling NFP.

**Criteria and Eligibility:** Any family is eligible to apply for a scholarship if an economic barrier could prevent the player from enjoying and playing soccer. **Financial need** will be the only determinant in receiving a scholarship. In order to assess **financial need**, the following will be taken into consideration in awarding the scholarship:

- Applicant must complete the required Pegasus Scholarship Application Form and return the completed application to Family Service: Prevention, Education & Counseling NFP.
- Scholarship applications are accepted throughout the year.
- **Financial need** will be the only factor in awarding a soccer scholarship. Out of respect for privacy, Pegasus will not request copies of W-2s, paychecks, tax returns etc. In lieu, as part of the scholarship application, the family will be asked to make a statement declaring how much the family makes annually and during the prior 90 days. Applications will be reviewed by Family Service: Prevention, Education & Counseling NFP who may, in their discretion, ask for additional documentation from the family during the review process.
- Scholarship recipients will be asked to pay for some portion of the club fees in addition to a player's uniform. Pegasus wishes to have the family pay whatever amount they feel they can pay. If circumstances prevent a family from making any payment, a scholarship will still be considered.

**Non-Discrimination Clause:** No one will be disqualified from consideration because of sex, race, color, creed or religious beliefs.



## DEERFIELD PEGASUS SOCCER CLUB SCHOLARSHIP APPLICATION FORM

**Deerfield Pegasus Soccer Club (Pegasus) Statement:** All applications will be taken into consideration based on availability of money for scholarships; number of applications received for current season; financial needs of applicant; number of children in the family playing Pegasus soccer. This application does not guarantee a scholarship; applicants will be notified of status in a timely manner. Pegasus is an equal opportunity club. It forbids discrimination on the basis of the race, religion, sex, nationality, age and health needs. Pegasus will keep all information provided below CONFIDENTIAL.

*(Please complete one application for each family. List all players in the family below)*

- |                              |                            |
|------------------------------|----------------------------|
| 1) Pegasus Soccer Team _____ | Soccer Player's Name _____ |
| 2) Pegasus Soccer Team _____ | Soccer Player's Name _____ |
| 3) Pegasus Soccer Team _____ | Soccer Player's Name _____ |
| 4) Pegasus Soccer Team _____ | Soccer Player's Name _____ |

Family's Address \_\_\_\_\_  
\_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Father/Guardian Email \_\_\_\_\_

Father/Guardian Day Phone \_\_\_\_\_ Evening Phone Number \_\_\_\_\_

Father/Guardian Occupation \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Mother/Guardian Email \_\_\_\_\_

Mother/Guardian Day Phone \_\_\_\_\_ Evening Phone Number \_\_\_\_\_

Mother/Guardian Occupation \_\_\_\_\_

Number of immediate family members \_\_\_\_\_ .

Are you a single income family? Yes \_\_\_ No \_\_\_

### Financial Need

Are there circumstances that prevent the family from paying for the player(s) club fees despite the income amounts shown below? (Circumstances may include loss of employment, separation or divorce, death of family member, and unusual out-of-pocket expenditures, to name a few) If so, please explain below. If you need more space, please attach additional sheets.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To respect the applicant's privacy, Pegasus will not request copies of W-2s, pay-stub or tax-returns. In lieu, the applicant is asked to make a good-faith declaration of his/her annual income and ability to pay Pegasus club fees. This section is mandatory. An incomplete application will not be reviewed.

Father's/Guardian's Annual Income: \$ \_\_\_\_\_ Income for prior 90 day period: \$ \_\_\_\_\_

Mother's/Guardian's Annual Income: \$ \_\_\_\_\_ Income for prior 90 day period: \$ \_\_\_\_\_

Please list what you feel you could afford to pay. The current Pegasus club fee is \$ 1,425 per player which includes the fall season, indoor play during the winter and the spring season. Uniforms which cost approximately \$85 are not included and are expected to be paid for by the family.

Amount FAMILY could contribute \$ \_\_\_\_\_. This amount could be paid in installments.

Does the family need assistance in obtaining uniforms for each player? Yes \_\_\_\_\_ No \_\_\_\_\_

**Important notes:**

Please review the application to ensure completeness and accuracy of information.

If you have any questions, please contact Lou Gantz (847-498-8908 or [lougantz@pegasussoccerclub.org](mailto:lougantz@pegasussoccerclub.org)).

I have read the Deerfield Pegasus Soccer Club scholarship policy. I confirm that the above information is accurate and correct.

I understand that Deerfield Pegasus Soccer Club has asked Family Service: Prevention, Education & Counseling NFP to assist in determining whether a family is in need of a scholarship. Applications should be sent directly to them. They will make a determination and notify the club treasurer. Financial information on the application form will not be shared with any club official.

Father/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send this application to:  
Dennis Skolnik  
Family Service: Prevention, Education & Counseling NFP  
777 Central Avenue  
Highland Park, Illinois 60035

**Internal Use Only:**

Recommended fee reduction for this family is \_\_\_\_\_

Name of Parent(s) or Guardian(s): \_\_\_\_\_

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

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

Notified of Status: \_\_\_\_\_ Date of Notification: \_\_\_\_\_

Family Service Representative: \_\_\_\_\_