



**SVM Fusion is committed to making our soccer program available to all interested players, regardless of financial limitations. We have scholarships available, with amounts of up to 50% of the club fees, for qualified families. Thanks to our scholarship sponsors and our many generous donors for underwriting this important program. Please fill out and return the scholarship request form if you'd like to apply.**

**Name of player(s) requesting scholarship:**

\_\_\_\_\_

**Date of Request:** \_\_\_\_\_

**Date(s) of Birth:** \_\_\_\_\_ **Age(s):**

\_\_\_\_\_

**Address:**

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

**Phone:** \_\_\_\_\_ **Email:**

\_\_\_\_\_

**Amount of Scholarship requested (up to 50% of team membership fees:**

\_\_\_\_\_

**Any additional information you'd like to include:**

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

Please visit our website at [www.svmfusion.com](http://www.svmfusion.com) for more information about our club, including fees, philosophy and schedules. E-mail us at [svmfusionadmin@gmail.com](mailto:svmfusionadmin@gmail.com) with any questions. Thank you. Forms can be e-mailed or physically mailed to: SVM Fusion, P.O. Box 433, Manchester VT 05254