



Massapequa Soccer Club 2024 Scholarship Application

Applicant Name _____ Tel. # (____) _____

Address _____
(Street)

(Town)

Place a check next to the programs that you have been involved in during your Massapequa Soccer Club career. If playing for another club, you may not apply.

☐ MSC Player

☐ MSC Referee

Team Name _____

Coach _____

☐ MSC Special Needs

☐ MSC Intramurals/ Squirts

☐ Other (specify) _____

Please ask the program advisors to fill out a Scholarship Recommendation Form that has been included with your application. Supply the advisor with a self-addressed and stamped envelope to the address below. They will return the form directly to the club. It is the applicant's responsibility to ensure recommendation forms are returned to the Scholarship Committee.

High School Attended _____

Name of college or university that you will be attending:

(Please attach a copy of your acceptance letter)

On a separate sheet, explain **1 - what the Massapequa Soccer Club has taught you, 2 - what you have done for the club.** This must be typed and between 200 and 350 words. **Do not** include academics, involvement in school clubs and school sports. Remember to take pride in your essay. **It counts.**

Return this application so it is **received by May 1, 2024** to:

**Applications Will Not Be
Accepted After Deadline**

Kathy Hillger
91 Harbor South
Amityville, NY 11701
ATTN: Scholarship Committee – Confidential

Any questions please contact Lincoln Page at 516-241-2413