## **Issaquah Youth Football**

P.O. Box 307, Issaquah, WA 98027

Fax: (425) 201-0710

Email: President@IssyFootball.org



## YOU MUST SIGN AND RETURN THIS AGREEMENT WITHIN 14 DAYS OF RECEIPT

## CHEERLEADING SCHOLARSHIP AGREEMENT

Our Club's philosophy is that every child that has the desire to participate in our cheer program should be given the opportunity regardless of financial need. Families in need of cheer scholarships are required to complete the "Scholarship" section of our online registration. The Board of Directors will review each scholarship application and decide to approve or deny based on financial need and past Club experience. Head Coaches provide feedback on each returning cheerleader and their interactions with the player's parents/guardians.

## **Scholarship Cheerleader/Parent Expectations**

Cheerleaders and parents/guardians granted scholarships by the Club are required to commit to our program and achieve the following minimum requirements:

- Submit all required paperwork by deadlines
- Attend Uniform Fitting/Swap in order to get a uniform
- Attend all required Parent/Player meetings
- Cheerleader must attend 90% of practices and games
- Arrive on time to practices and games. Also MUST be on time to pick child up from practices and games.
- Demonstrate a desire to learn, work hard, and be a good team member
- Parent/guardian should help with Club volunteer duties whenever available

\*\*\* After our regular season has finished (last game/playoffs) Parent/Guardian has 10 days to return the following uniform items to the Club: SHELL, SKIRT and MOCK (undershirt). Pom Poms, bag, bow and warm ups may be kept by cheerleader. Items must be washed and brought back in <u>GREAT</u> condition. If cheerleader decides to cheer the following season, we will keep uniform for them and hand out the next season. \*\*\*

Scholarship players who do not comply with the above requirements may be removed from the Club and/or will not be granted scholarships in subsequent seasons. By signing this document, you and your child agree to these requirements as terms of the scholarship. Please complete the form, sign, and return to Issaquah Youth Football (fax, mail, email).

Cheerleader's Name:	
Parent / Guardian Name:	
Parent / Guardian Signature:	Date: