

# Wilsonville Basketball Association 2024-2025 Financial Assistance Application

The Wilsonville Basketball Association has funding available for participants who are in need of partial financial assistance. In order to apply for partial financial assistance, this application must be completed and returned via e-mail to:

Wilsonville Basketball Association  
Roberto Flores, President  
[WBAPresident@Yahoo.com](mailto:WBAPresident@Yahoo.com)

Please complete one form for each financial assistance request.

**Parent/Guardian Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Player Name:** \_\_\_\_\_  
**Age/Grade Level:** \_\_\_\_\_  
**Gender:** \_\_\_\_\_

For my Player: I will pay \$\_\_\_\_\_ (no less than 50% of the Cost). I am requesting that the WBA assist for the remainder of the balance with scholarship funding.

I understand that if I fail to timely pay my portion of the fee, my child will forfeit his/her spot on the team.

Total Fee (Clinic/Select/Rec/Camp) \$ \_\_\_\_\_  
Minus Your Payment - \$ \_\_\_\_\_  
= Total Requested Scholarship = \$ \_\_\_\_\_

Please provide a brief description as to why financial assistance is being requested:

---

---

---

---

---

---

---

---

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_