






Teton Valley Youth Lacrosse Association

www.tetonlax.com



2026 Scholarship Application

-  Varsity Program Submit by January 28, 2026
-  7th and 8th Youth Program Submit by January 28, 2026
-  Youth Program Submit by February 25th, 2026

Mail to:

TVYLA Board – P.O. Box 874, Victor, ID 83455

OR

Email to: heather@tetonlax.com

Player Information

Player USA Lacrosse ID:

Player Age:

Number of Players in Family:

Number of Years Playing Lacrosse:

Financial Information

Does this player qualify for:

- ☐ Free Lunch Program
- ☐ Reduced Lunch Program
- ☐ Neither

Statement of Need

Please describe in detail your reason(s) for requesting financial assistance:



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Gear Rental Support

Would you like to request scholarship support for gear rental:

☐ Yes ☐ No

Volunteer Commitment

I understand that if a scholarship is awarded, I am responsible for 5 volunteer hours per scholarship player per season (capped at 10 hours per family).

Signature: _____ Date: _____

For Office Use Only

Date Received: _____

Reviewed By: _____

Award Decision (100% / 50% / 25%): _____

Gear Rental Approved (Y/N): _____

 Incomplete applications may not be considered.