



Financial Assistance Application
STARS Basketball Club (Club Teams and/or Programming)
2024-25 Winter Teams

STARS Basketball Club desires to provide sports opportunities to every individual regardless of their ability to pay the full extent of program fees. To be considered for financial assistance, a parent/guardian must complete this form in its entirety.

Instructions

Applications must be submitted prior to final tryout session.

All financial assistance applications will be handled on a case-by-case basis and the reduction in player fees, if any, will be determined upon by the STARS Basketball Scholarship Committee.

The completed application and attached Federal 1040 Tax Form should be placed in an envelope marked “Confidential” and mailed to:

STARS Basketball Club – Confidential
C/O Lance Akridge
9129 Concord Hunt Circle
Brentwood, TN 37027

*You can also scan/email forms to Lance Akridge: LAkridge@StarsBasketballClub.com

If you have any questions, contact Lance Akridge (Club Director): LAkridge@StarsBasketballClub.com

Please Complete All Requested Information on Both Pages

If any fees are reduced, the athlete will be enrolled in our scholarship program **which encourages each scholarship parent and/or athlete to volunteer hours for the club throughout the year**. The number of hours will be proportional to the size of the scholarship and may be discussed before the final execution of financial assistance.

Parent Information

Name: _____ Phone: _____
Address: _____ City: _____ Zip Code: _____
E-mail: _____

Please Circle Household Annual Income Range:

\$0 - \$25,000 \$25,000 - \$50,000 \$50,000 - \$75,000 \$75,000 – Higher

Player Information

Name: _____ Grade: _____ Gender: _____

Location (please circle): SOUTH Hub NORTH Hub

Names of Other Children (if any) Applying for Financial Assistance: _____

Please write a short paragraph explaining the need for this scholarship:

All Financial Assistance funds that are distributed to accepted applicants are only valid for the duration of the program selected. If financial assistance is needed the following year/program, the applicant must reapply using the same process.

To be considered for Financial Assistance, all required forms must be completed and returned with an attached Federal 1040 Tax Form.

Parent/Guardian Signature: _____ Date: _____