

**Landen Lucas Foundation  
Sports For Life Scholarship Request Form**

Student's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Sport you would like to participate in \_\_\_\_\_ Cost \$ \_\_\_\_\_

Sport / Club Team, Coach, Contact info (email, phone) \_\_\_\_\_

Does your family qualify for free and reduced lunch or federal aid? \_\_\_\_\_

What amount of scholarship are you requesting? \_\_\_\_\_

Do you need us to help provide shoes or equipment for this sport? \_\_\_\_\_

If the Landen Lucas Foundation commits to helping pay the necessary fees for your child to participate in this sport, will you commit to getting him/her to practice, providing water and healthy meals, and encouraging your young athlete to keep trying even when it's tough? \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

If the Landen Lucas Foundation commits to helping pay sports fees for you to participate in the sport, will you commit to pursue excellence by learning and improving your skills, sheering for others, not giving up, and trying to always do the right thing? \_\_\_\_\_

Student Signature \_\_\_\_\_

Our Motto:  
Pursue Excellence  
Cheer For Others  
Do What's Right

Please complete this form and mail it to: Sports For Life, 4000 West 6<sup>th</sup> St, suite B #333, Lawrence, KS 66049 or copy and paste it into the body of an email and send to [ShelleyLucas11@gmail.com](mailto:ShelleyLucas11@gmail.com)

We hope to be a blessing to your family and will contact you soon with further information. Thank you! *Shelley Lucas – Landen Lucas Foundation Director*