

**Laguna Youth Baseball Scholarship Application**  
**Applications due by January 1, 2026**  
**email to [president@lagunayouthbaseball.org](mailto:president@lagunayouthbaseball.org)**

Name of Applicant (Player's Name): \_\_\_\_\_ DOB: \_\_\_\_\_  
\_\_\_\_\_ DOB: \_\_\_\_\_  
\_\_\_\_\_ DOB: \_\_\_\_\_

Guardians Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(Phone)

1. Have you played in Laguna Youth Baseball Before?

\_\_\_\_\_  
\_\_\_\_\_

2. If Yes, what division and team was your player on last season?

\_\_\_\_\_  
\_\_\_\_\_

3. If scholarship is granted you are required to volunteer within the league a minimum of 10 hours.  
Would you be able to fulfill this commitment? Examples of volunteering would be coaching, team parent,  
snack bar, score keeper, field set up before and after games, etc.

Yes \_\_\_\_\_ No \_\_\_\_\_

4. If yes, what would you be able to help with?

\_\_\_\_\_  
\_\_\_\_\_

I have read over LYB's scholarship rules and requirements and fully understand the commitment and  
rules of eligibility and agree to said rules and requirements.

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date