



## **McHENRY VIPERS TRAVEL SOCCER FINANCIAL AID REQUEST FORM**

Financial scholarships are awarded on the basis of financial need and availability of McHenry Soccer funds. Recipients of financial scholarships for the McHenry Viper Competitive Soccer program will be required to fulfill hours of volunteer work per season and scholarship reimbursement will be made upon completion of agreed upon hours and activity. Priority will be given to returning Viper players. McHenry Soccer is not obligated to award scholarships to all applicants. Applications which are not completed in full will not be reviewed.

Financial Aid recipients are required to sign the McHenry Soccer financial agreement, in which the family agrees to the awarded financial responsibility and any payment plan set up between the individual and the club administrator. If the parents of recipients of financial aid do not meet this agreement, McHenry Soccer reserves the right to revoke the scholarship, placing the player in bad financial standing, which can result in the removal of training and playing privileges.

Scholarships DO NOT include uniforms, fees for additional tournaments beyond what is specifically covered by the Viper registration fees, player travel expenses for any tournaments, indoor league participation (if applicable), and any other items not specifically mentioned in the Program Details. Scholarship application must be submitted with tryout registration forms, at the registration night.

**Instructions:** McHenry Soccer is strongly committed to ensuring that all players who are selected for our travel soccer teams are able to play, regardless of their family's financial resources. To apply for a reduction of your 2013-2014 travel soccer fees, you must complete the below application along with documentation proof of your hardship. Examples are listed below in item #13.

Completed Financial Aid applications must be received **NO LATER THAN FRIDAY, JUNE 28, 2013.**

Please submit forms to:

McHenry Area Soccer Federation  
PO Box 423  
McHenry, IL, 60051

Or email your completed request form to: [treasurer@mchenrysoccer.org](mailto:treasurer@mchenrysoccer.org)

**PLEASE READ CAREFULLY & COMPLETE ALL ITEMS BELOW:**

Child Registering: Boy \_\_\_\_\_ Girl \_\_\_\_\_ New to Vipers? Yes \_\_\_ No \_\_\_

Grade for fall season: 1 2 3 4 5 6 7 8 HS (Circle grade child will be in Fall 2013)

Age group for fall season: U8 U9 U10 U11 U12 U13 U14 HS

1. Name of Player: \_\_\_\_\_ Player's Date of Birth: \_\_\_\_\_

2. Player's Team: \_\_\_\_\_ Player's School: \_\_\_\_\_

3. Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

4. Player's Address: \_\_\_\_\_

5. Parent's or Guardian's Address, if different from player's address:

\_\_\_\_\_

6. Father's Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

7. Mother's Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

8. Email address: \_\_\_\_\_

9. Number of adults in the player's household: \_\_\_\_\_

10. Number of children (under age 18) in the player's household: \_\_\_\_\_

11. Total Family Income: \_\_\_\_\_

(This amount should include income of any/all caretakers and/or guardians of player)

12. Amount your family can afford to pay **per month** for soccer this year: \$ \_\_\_\_\_ / month

13. The following documents are acceptable as verification of your household income. Please indicate which one you are providing as part of your application:

\_\_\_\_\_ Current Proof of Eligibility for Free or Reduced Lunch Program

\_\_\_\_\_ Current Proof of Eligibility for Woman Infant and Children Program (WIC)

\_\_\_\_\_ Current Proof of Eligibility for Temporary Assistance to Needy Families Program (TANF)

\_\_\_\_\_ Current Proof of Eligibility for Food Stamps

Note: If you do not have any of the above documents but still wish to apply for financial aid, please contact [treasurer@mcherysoccer.org](mailto:treasurer@mcherysoccer.org) and reference 'scholarship request'.

14. Please check the volunteer duties you would be available work (others will be added as they become available):

a. McHenry Viper Registration Night

b. McHenry Soccer Annual Picnic

c. Field Lining

- d. Field Maintenance
- e. Fundraising Activities

15. COMMENTS: Please feel free to write in the space below any additional information that may assist the MASF Financial Aid Committee in evaluating your financial need.

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16. Read and initial next to each paragraph below. Then sign and date below.

\_\_\_\_\_ I certify that all the information on this application is true and correct, that all required financial documents are attached, and that all income is reported.

\_\_\_\_\_ I understand that after review of my application, the Financial Aid Committee may determine that I am responsible for a portion or possibly full payment of the 2013-2014 annual player fee for travel soccer. After the MASF Financial Aid Committee notifies me of the amount of aid I will receive, I will need to contact my child's coach or team manager to let them know if my child will or will not play.

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