



MCHENRY SOCCER FINANCIAL AID REQUEST FORM

McHenry Soccer is strongly committed to ensuring that all players are able to play soccer regardless of their family's financial resources. Financial scholarships are awarded on the basis of financial need and availability of McHenry Soccer funds. Recipients of financial scholarships for the McHenry 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. McHenry Soccer is not obligated to award scholarships to all applicants. Applications 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 playing privileges.

To apply for a scholarship, you must complete the application below and include documented proof of your hardship. Examples are listed on the application - see item #13.

Completed Financial Aid applications must be submitted to:

McHenry Soccer
PO Box 423
McHenry, IL, 60051

OR

e-mail completed form and documentation to:

Treasurer@mchenrysoccer.org

PLEASE READ CAREFULLY & COMPLETE ALL ITEMS BELOW:

Child Registering: Boy ____ Girl ____ New to McHenry Soccer Yes No

Grade for Fall season: Preschool K 1 2 3 4 5 6 7 8 (circle grade child will be in Fall 2013)

Age group for fall season: KK U6 U7 U8 U9 U10 U11 U12 U13 U14

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 and reference 'scholarship request'.

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

____ McHenry Soccer Annual Picnic

____ Field Lining

____ Field Maintenance

____ Fundraising Activities

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

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 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 fees. After the Financial Aid Committee notifies me of the amount of aid I will receive, I will need to contact my child's coach and let the coach know if my child will or will not play.

Parent/Guardian Signature _____ Date _____