

Fox Cities United Soccer Club of Wisconsin Inc.

FINANCIAL ASSISTANCE APPLICATION



Fox Cities United Soccer Club Inc. prides itself on the role it plays within the Greater Fox Valley community. As part of our role within that community we would like to make premier soccer available to all who qualify on a skills basis, regardless of their financial ability to participate. As such we may approve a limited amount of financial assistance based upon financial need and ability level. Please complete fully and attach to your player application packet.

PLAYER INFORMATION

FIRST NAME _____ LAST NAME _____ DATE OF BIRTH _____

F.C.U.S.C. TEAM APPLYING FOR _____ SEASON _____

PARENT INFORMATION

FATHERS NAME	MOTHERS NAME
ADDRESS	ADDRESS (if different)
E MAIL	E MAIL
HOME PHONE	HOME PHONE
CELL PHONE	CELL PHONE
WORK	WORK

HOW MUCH FINANCIAL AID ARE YOU REQUESTING? _____

DOCUMENTATION

All documents must be attached to application. Missing documentation will result in the application not being processed.

- W-2 for the player's father
- W-2 for the player's mother
- 1040 for the player's father
- 1040 for the player's mother (unless filed jointly as a family)
- Other Documents that might assist application i.e. bank statements, letter from employers, details regarding change in income etc

AGREEMENT

I agree that if I leave FOX CITIES UNITED for any reason within the twenty four months of the date below the full amount of my financial assistance is due immediately. In return for any financial assistance I may be given I agree to help the club with reasonable requests:

- Skilled in the following area _____
- Other volunteer suggestion _____

I agree to meet financial obligations on time and understand if payment is late participation in all F.C.U.S.C. events will be postponed.

Signed _____ Date _____

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All Documents Received?	Program Applying for?
Full Cost of requested Program?	Rec'd Financial Assistance Before?
Financial Assistance Approved?	Percentage Assistance Approved
Program Fee Required to pay	Payment Plan
Notes	

Signed: _____ Date _____

Fox Cities United Soccer Club Authorized Representative/General Manager/Owner