

Folsom Soccer Club/FAA Financial Assistance Application



The Folsom Soccer Club/FAA Financial Assistance Program is designed to help those in financial need. It is the goal of Folsom Soccer Club/FAA to turn no one away because of the inability to pay. An applicant must be a Folsom resident. This application is not a guarantee of financial assistance. All financial assistance is granted on a sliding scale based on income and need. We have a limited amount of financial assistance so we might not be able to fully fund everyone who applies. Financial assistance recipients are required to re-apply every year.

Applicants will be required to pay any affordable amount. If possible, we encourage the applicant to repay any or all of the monies received from the financial assistance program if your circumstances improve so to enable Folsom Soccer Club/FAA to continue helping those who need financial help. If your application is approved, you will be asked to serve in a volunteer capacity to assist the Folsom Soccer Club throughout the year.

You need to complete the application in full and attach a copy of your current SMUD bill. Indicate with the letters N/A if the information requested does not apply to you. A separate request form is required for each player. Filing an incomplete application may result in a reduction or denial of financial assistance.

All information submitted will be held in the strictest confidence and will be viewed by the Folsom Soccer Club Executive Committee and FAA when considering your application.

Over the years the demand for financial assistance has increased as the economy has soured. As a result both Folsom Soccer Club and FAA are taking a much closer look at financial assistant applications.

1. What items are you asking assistance for?

- Registration: Comp Recreation
- Uniform: Jersey Shorts Socks

Note: You can use the same uniform each year except from U8 to U9.

2. What type of assistance are you asking for?

- Monthly Payments?
Monthly payments will be made through post-dated checks payable to the Folsom Soccer Club
- Scholarship/Financial?
- Both Monthly Payments and Scholarship?

3. How much assistance do you need?

- How much can you afford to pay toward the items designated in #1? _____
- If you requested monthly payments and scholarship in #2, how much can you afford monthly?

4. Have you or anyone in your family been a volunteer to help Folsom Soccer Club in the past?

Yes No If yes, in what capacity? _____

5. Are you willing to volunteer your time to the club? Yes No

Player Information

Name: _____ Birthdate: _____ Gender: _____

Mother's Information

Name: _____ Email: _____

Address: _____ City: _____

Phones: Home _____ Cell _____ Work _____

Occupation: _____ If unemployed source of income _____

Father's Information

Name: _____ Email: _____

Address: _____ City: _____

Phones: Home _____ Cell _____ Work _____

Occupation: _____ If unemployed source of income _____

General Information

How many people live in the home (9-12 months a year) _____

How many children live in the home _____ How many play for Folsom Soccer _____

What is your annual household income (from all sources) _____

Do you receive any local, state, or federal assistance and if so what: _____

Has this player received financial assistance in the past? If yes, when _____

Have other players in your family received assistance in the past? If yes, please explain:

Special circumstances the Folsom Soccer Club/FAA should be aware of that pertains to your request for financial assistance (recent hardship; lost job etc). Please explain:

References

(examples include clergy, social worker, doctor, other non-family members)

Name _____ Relationship _____ Phone # _____

Name _____ Relationship _____ Phone # _____

Name _____ Relationship _____ Phone # _____

Agreement

I hereby certify that all of the above information is true and correct. I understand that false statements on this application shall be considered sufficient cause for disqualification from funding assistance. I understand that this information is being provided as a method to assist Folsom Soccer Club/FAA in determining the level of financial assistance that may be awarded toward player fees or uniform for the _____ Folsom Soccer Club soccer season.

I understand that monies provided through this application process will be used to pay Folsom Soccer Club player fees or uniforms and will not pay for any supplemental expenses associated with participating in Folsom Soccer Club, such as travel expenses, team fees, etc.

I authorize the representatives of Folsom Soccer Club/FAA to discuss this application and my individual and/or household information that may relate to my application for financial assistance in an effort to make a determination of what financial assistance may be granted and/or track payments against an established payment plan.

I understand that I will be contacted if I am accepted for assistance, and that assistance may be either a full or partial scholarship, or monthly payments. I understand that post-dated checks for monthly payments are due to the club no later than 14 days upon notification of approval. I understand that failure to complete my commitment may result in me being required to pay back the financial aid, and being denied financial aid in the current and/or next season.

I understand that I may be asked to provide supporting documentation, such as payroll stubs, tax returns, Public Assistance documentation, child support and or alimony receipts.

Signature of applicant: _____ Date: _____

Please mail the completed application to:

Folsom Soccer Club
Attention: Administrator
P.O. Box 821
Folsom, CA 95763-0821

Office Use Only

Date received: _____ Approved Denied reason _____

Scholarship amount: Registration _____ Uniform _____ Recipient's responsibility: \$ _____

Payments: Monthly payment amount \$ _____ Post-dated checks received: Yes No

Approved by: _____ Date notified: _____