

Bakersfield Brigade Youth Soccer Club

Financial Assistance Available

A limited amount of scholarship funds is available for families that qualify. Financial assistance will be distributed to players based on need and can be applied towards monthly fees and/or the acquisition of uniforms. The Scholarship Committee and the BBYSC Executive Officers will keep information submitted and any financial assistance granted in strict confidence.

APPLICATION DUE DATE: AUGUST 18th, 2008

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Instructions to Apply for Financial Assistance:

1. Complete application form with all requested information and sign form. Players must commit to work 10 volunteer hours on club activities over the season.
2. Attach documentation of income (either application for reduced-price/free school lunch program or first page of last-year's tax return / W-2).
3. Put application and documentation in sealed envelope, mark for "Scholarship Committee", and give to Team Manager.

All submitted information will be kept confidential, Scholarship Committee will make decisions and all applicants will be notified of the results within 10 days of submitting application.

Bakersfield Brigade Youth Soccer Club - 2008 - 2009 Season
Confidential -- Application for Scholarship -- Confidential

Note: This application requests assistance with monthly club fees and/or uniform costs.

Player Information

Player Name _____ Age/Gender & Team Name _____
Street address _____ Team Manager _____
_____ Telephone _____
E-mail address _____ School & Grade _____
How long have you been with our club? _____

Parent/Guardian Information

Resident Parent or Guardian Name(s) _____
Street address _____
Telephone _____
E-mail address _____

Children in Family

	name	age	soccer team	other sports	school & grade
# 1	_____	_____	_____	_____	_____
# 2	_____	_____	_____	_____	_____
# 3	_____	_____	_____	_____	_____
# 4	_____	_____	_____	_____	_____

Evidence of financial need

Does family have single or multiple incomes? (please identify generally what kinds)

Do children receive free or reduced-price lunches at school? _____

How much of monthly fees can be afforded? _____

How much financial aid in total is requested? (up to \$500 and/or uniform) _____

Please state reasons (in less than 100 words) for requesting financial aid (attach additional sheet if needed):

Please attach a copy of either application for reduced/free lunch program or 2007 tax return (page 1 only).

Certification by Parent or Guardian with whom player resides

I am/We are hereby applying for financial aid from BBYSC to benefit the player named above.

I/We certify that all information submitted in and with this application is truthful and accurate.

I/We agree to comply with all terms of the BBYSC financial aid policy.

My child agrees to work at least 10 volunteer hours during the season.

Signed: _____ Date signed: _____

Printed Name: _____