



Yavapai Soccer Club

SELECT/ACADEMY FINANCIAL ASSISTANCE APPLICATION

Player's name: _____ Player's Age: _____ Player's Birthdate: _____

Parent's name(s): _____

Parent's email(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell/Text _____

Annual Household Income: _____

- U07-U10 Team Fees: \$85 registration, 6 \$55 monthly payments
- U11- U12 Team Fees: \$180 registration, 8 \$77.50 monthly payments
- U13-U14 Team Fees: \$185 registration, 5 \$85 monthly payments, 3 payment \$75
- U15- U19 Team Fees: \$195 registration, 5 \$95 monthly payments, 1 payments \$75

Please email the completed application and the first 2 pages of your 2019 taxes to finance@yavapaisoccer.com.

Please explain reason(s) for this request (include monthly income, # of family members, reason the regular registration fees will cause your family a hardship):

I understand that submission of this form does not guarantee financial assistance. I understand that scholarship requests are considered by a committee and awarded based on need and available funds. I understand that fees owed must be submitted at the time of registration. I understand that applications must be submitted by the registration deadline.

Signature: _____ Date: _____

Printed Name: _____