



HCSA Financial Assistance Guidelines

It is the mission of HCSA to not allow financial circumstances to prohibit a player's opportunity to participate in classic soccer. HCSA has a limited amount of funds available as assistance towards Classic team fees for each year. For consideration for financial assistance please complete this application and return it to the Office Manager by June 1, 2011. Applications received after this date will be considered only if funds are available. Financial Assistance Applications will be reviewed by a Financial Assistance Committee consisting of the HCSA President, HCSA Treasurer, and HCSA DOC. Information received in the application will remain confidential within the Financial Assistance Committee.

HCSA understands some families have financial circumstances which prevent them from fully supporting the club's Classic Annual Fees which is why the Financial Assistance Program is in place. However, in lieu of paying Classic Annual Fees in full, families who request financial assistance can often provide volunteer hours to benefit HCSA. Therefore, while the Financial Assistance Committee determines the amount of assistance to be granted to a family they will also determine an hourly amount of volunteer hours expected to be served by the family for the granted assistance for the soccer year. Players may be able to help with this requirement depending on age.

1. Financial assistance will be granted to assist with Classic Annual Fees based on 2 criteria items.
 - a. The family's proof of a true verifiable financial need through the Financial Assistance Application
 - b. The player's consistent attendance of all team practices and games while demonstrating a positive attitude, strong work ethic, and good sportsmanship.
2. A personal interview may be requested by members of the Financial Assistance Committee.
3. Tax Forms and income verification documentation may be required. Failure to provide requested documentation will result in an incomplete application and denial in the request for aid.
4. Financial Assistance Applications will be reviewed by the Financial Assistance Committee who will determine the player and family's qualification of the above 2 criteria items and will be responsible for determining the amount of assistance granted per request with the financial assistance funds.
5. Any granted financial assistance is applied as a reduction in the player's Classic Annual Fees. The remaining balance of the player's Classic Annual fees must be paid in accordance with a modified Classic Annual Fee Schedule that the Financial Assistance Committee will prepare for you.
6. In accepting a financial assistance package the family will be required to sign a contract with their modified Classic Annual Fee Schedule and agreement to serve their volunteer hours as designated by the Financial Assistance Committee based on the amount of assistance granted.

The following fees or expenses are NOT covered by Financial Assistance:

- Tryout Fees
- Team Tournament Expenses
- Coach Travel Expenses
- Uniform Fees



HCSA Financial Assistance Application

1. Player's name: _____ Age: _____ Team: _____
2. Address: _____ City: _____ Zip: _____
3. Phone: _____ Cell Phone: _____ E-mail _____
4. Mother's Name: _____ Address: _____ Phone: _____
5. Mother's Employer: _____ Gross Annual Income: _____
6. Father's Name: _____ Address: _____ Phone: _____
7. Father's Employer: _____ Gross Annual Income: _____
8. What is the total household gross monthly income from all sources? _____
9. How many people live at this household and are dependent upon this income: _____
10. Did applicant play for HCSA last year? _____
11. Number of children playing for HCSA? _____ Name(s): _____
12. Please state the reasons for your request for financial assistance. Be sure to include any special circumstances that may not be reflected in this application: _____

13. What volunteer duties will you be willing to assume for the club? (check all that apply)

- Fundraising Committee Tournament Committee Board Member
 Field Maintenance Concession Sales

- I understand that parent participation in fundraisers and volunteering for club duties is mandatory and I agree to help with team and club activities as required.
- I understand that I must meet all financial and volunteer obligations in order to be eligible for continued play or release.
- I understand that failure to meet all volunteer or financial obligations will result in the loss of player card as well as a "bad standing" designation with NCYSA for the player.
- I agree that if I foresee problems with tournament/travel/team expenses I will speak to my team manager or a HCSA Board Member before the start of the season to try to make arrangements.

Player's parent/guardian signature (Mother) Player's parent/guardian signature (Father)