



ONSLOW CLASSIC SOCCER ASSOCIATION Financial Assistance Application – 2008 / 2009

It is the policy of OCSA to provide soccer opportunities for all youth regardless of ability to pay to the extent funds are available. You must complete this form and attach a copy of your 2007 Federal 1040 tax form. (If applying for fall 08 assistance and 2008 Federal 1040 tax form if applying for spring 09) The player must be listed as a dependent on the 1040 form. **Any application that does not include this form will not be considered for financial aid/dues assistance. If your child plays a fall and a spring season you must apply for each season.**

All Select and Development players on financial assistance will pay their registration fees at the time of registration.

Financial assistance will potentially provide funds for Registration and monthly Dues Fees only.

Families must stay up to date with their team fees with the team in order to remain on the assistance program. Team Treasurers will give us updates of assistance players of who do not stay current with their team fees.

Instructions: Financial assistance forms will be accepted until June 30 for the fall season and until October 31 for the spring season. Bring or mail your financial assistance form and required documents in an envelope marked "Confidential" to:

Financial Assistance Committee
OCSA
824 Gum Branch Road, Suite P
Jacksonville, NC 28540

Information in application will only be used in determining eligible candidates for financial assistance and will not be released. If all required information is not sent in with the application – your child may not be considered for a scholarship this season.

--Applicant Information --

Player's Name _____ Age Group _____

Parent's Name _____

Home Address _____

City _____ State _____ Zip _____

Email Address (please print legibly) _____

--Employment Information--

■ Are you currently employed? ___ Yes ___ no

Employer's Name _____

Address _____

Position held _____

Length of time with Company _____

■ Is your spouse/significant other employed? ___ Yes ___ no

Employer's Name _____

Address _____

Position Held _____

Length of time with Company _____

-- Financial Data--

Do you have any additional income not listed on the Federal 1040 form?

___ No ___ Yes If yes, please list type and amount _____

If the player is not listed as a dependent on your Federal 1040 form,
please explain why _____

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|---|
| Are you currently receiving State or Federal aid? List all (i.e. food stamps, Medical aid, etc.) |
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Do you qualify for the school district's free lunch program? ___ Yes ___ No

Please describe any special circumstances and why you should be considered for financial assistance:

Upon acceptance of financial assistance, applicant **agrees** to assist OCSA with fundraising or other club functions as needed. I fully understand that should my employment or financial position change that I will notify OCSA of such change. I also agree that should partial or no financial aid be granted, I will be responsible to pay the balance of training fees due.

Parent's Signature _____ Date _____

To be considered for financial assistance all applications must be complete and required forms must be returned with the application form.