



Southern Soccer Academy Financial Aid Application

The SSA Financial Aid Program is designed to make Select and Academy soccer more affordable for those families with limited means. The amount of assistance is limited each year, and program awards are handled on a first-come, first-served basis.

The program is based on financial need only, and is not based on playing ability, while the amount offered will not reduce fees for any applicant to an amount any lower than 25% of the published program fees. Factors such as family income, family assets, including vehicles and property (whether used as a residence or for the purposes of rental), and the number of years a family has been requesting financial aid will be factored into the process of calculating the amount of financial aid to be provided. In addition, Financial Aid recipients may be required to provide to the club up to 30 service hours of work per year.

Please note that financial aid applies solely to the program fees charged, and does not cover additional costs such as uniforms, tournament/event fees payable to the team account, travel expenses, camps, or optional training events.

Financial aid information provided in this application is for the sole purpose of the SSA Financial Aid Committee to determine eligibility and will not be shared with anyone other than the Committee.

Please submit the following documents to SSA to be considered for financial aid:

- 1) This Financial Aid Application, completed in full.
- 2) Copy of all last year's W-2 income tax forms and a copy of the first two pages of last year's 1040 income tax return (with SS #s blacked-out)
- 3) Copies of the last two employment pay stubs (or 1099 payments if you are an Independent Contractor).
- 4) 1040 Schedule C if you have income from a business

To Sharon Gaughan - 40 Whitlock Place, Suite 200, Marietta, GA 30064

Applicant Details

Applicant (Parent/Guardian) Last Name	Applicant First Name	
Address	City	ZIP
E-Mail Address	Phone #	

Player Details

Player Last Name	Player First Name	DOB	Gender (circle)
		/ /	B G
Program Location (please circle)	Program Placement for Upcoming Season (please circle)		
Cartersville Coastal Coweta DeKalb Marietta Kennesaw/Paulding Rome Northside	9U-12U Academy ECNL NPL SCCL Other		

Please use the boxes below for any additional players in your household that you are requesting Financial Aid for:

Player (2) Last Name	Player (2) First Name	DOB	Gender (circle)
		/ /	B G
Program Location (please circle)	Program Placement for Upcoming Season (please circle)		
Cartersville Coastal Coweta DeKalb Marietta Kennesaw/Paulding Rome Northside	9U-12U Academy ECNL NPL SCCL Other		

Player (3) Last Name	Player (3) First Name	DOB	Gender (circle)
		/ /	B G
Program Location (please circle)	Program Placement for Upcoming Season (please circle)		
Cartersville Coastal Coweta DeKalb Marietta Kennesaw/Paulding Rome Northside	9U-12U Academy ECNL NPL SCCL Other		

Additional Household Dependents (anyone else in the household not listed above as the applicant or as a player)

Last Name	First Name	Relationship	DOB

Household Income/Expenses (Monthly)

Monthly Household Income (Include applicant and spouse/partner)	\$	Monthly Expenses	\$
Gross Income from Employment, including W-2 and 1099 Independent Contractor Income		Mortgage	
Unemployment Benefit		Rent	
Social Security Income		Auto Loan/Lease (car 1)	
Child Support		Auto Loan/Lease (car 2)	
Food Stamps		Auto Loan/Lease (car 3)	
Alimony		Alimony	
Additional Income (other than business income)		Child Support	
		Additional Expenses	
Total		Total	

Business Income (Annual)

Annual Net Income from Self Employment/Sole Proprietorship (not including property rental described below)	\$
Annual Net Income from Rental of Property(s) (other than the place of residence)	\$

School Free/Reduced Lunch Program

Does the player(s) listed on page 2 receive support through a School Free/Reduced Lunch Program? (circle)	Y N
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Household Assets

Vehicle Make and Model (Please list each vehicle owned below)	Model Year

