

## Important Information for Financial Assistance



The purpose of the North Allegheny Soccer Club (hereinafter referred to as “NASC”) is to promote the game of soccer for youth living within the North Allegheny school district. In order to serve this purpose, NASC offers financial assistance to those children living within the North Allegheny School District who require financial assistance to play organized soccer.

Financial assistance is provided at the board’s discretion. The number of children demonstrating need in a given season and the club’s ability to provide financial assistance are factored into each request. The board requires the following for each child’s request for financial assistance:

- (1)** this application
- (2)** a copy of the previous year’s tax return for each guardian
- (3)** a copy of the most recent pay stub/social security check/disability check for each guardian

Incomplete applications will not be processed. Please note whether your child will have any equipment needs. The board can attempt to assist your child through donations of used and new items should this assistance be necessary as well. If your application is approved, a NASC representative will contact you to provide you with the information you need to register your child.

Please note that you, another adult family member, or a combination of adult family members will be responsible for fulfilling 8 volunteer hours at NASC during each season in which the player receives financial assistance.

You may email completed applications to [president@nasoccerclub.org](mailto:president@nasoccerclub.org) or mail completed applications to Otto Tancraitor at 9739 East Road Pittsburgh, PA 15237. If you have any questions during the application process, please contact Otto Tancraitor at 724-396-8268 or [otto@nasoccerclub.org](mailto:otto@nasoccerclub.org)

## **Application for Financial Assistance**

### **Player Information:**

Player Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Boys or Girls Soccer? \_\_\_\_\_ Age Group \_\_\_\_\_

In House or Travel? \_\_\_\_\_ Coach \_\_\_\_\_

Has the player ever before participated in NASC? If so, when and for what team?

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Has the player ever before received financial assistance from NASC? If so, when and in what capacity?

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### **Guardian #1 Information:**

Guardian 1 Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Number of Adults in Household \_\_\_\_\_ Number of Children in Household \_\_\_\_\_

Employer \_\_\_\_\_ Employer Phone Number \_\_\_\_\_

**Guardian #2 Information:**

Guardian 2 Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Number of Adults in Household \_\_\_\_\_ Number of Children in Household \_\_\_\_\_

Employer \_\_\_\_\_ Employer Phone Number \_\_\_\_\_

**Statement of Truth:**

I agree that the information provided is true to the best of my knowledge. I understand that falsifying any information could cause my child to be dismissed immediately without refund. I understand that players who are fraudulently dismissed will not be released from previously agreed upon financial obligations. I understand the NASC Board will review my application. I (or another adult family member or a combination of adult family members) agree to fulfill 8 volunteer hours throughout the course of the season in which my child receives financial assistance.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_