



2020-2021 FINANCIAL ASSISTANCE APPLICATION

The Indiana Southwest Futbol Club is committed to providing athletic opportunities for our players regardless of a family's financial position. ISFC does not want finances to restrict an athlete from participating in any of the ISFC soccer programs and has established a financial assistance program to off-set a portion of player's club and team fees.

Financial assistance is not guaranteed and is limited based on the number of ISFC applicants.

FINANCIAL ASSISTANCE REQUIREMENTS:

- Application completed in its entirety
- ISFC registration and uniform fees paid in full
- Minimum weekly/monthly payment obligations met (if applicable)
- Volunteer for and complete at least 15 hours of ISFC sponsored activities (parent and player)
 - Field maintenance
 - Concessions
 - Fundraising events and activities
- Participate in any/all ISFC club and team fundraisers
- Apply for any other available external scholarships or sponsorships

Please list: _____

PERSONAL INFORMATION: (application information is strictly confidential)

Player Name _____

Parent Name(s) _____

Home address: _____

Email address: _____

Player Date of birth ____/____/____

Team: _____ (year, boys or girls)

FAMILY FINANCIAL INFORMATION:

TOTAL FEES OWED THIS SEASON (include club fees, uniform, team fees) \$ _____

TOTAL AMOUNT ABLE TO BE PAID BY FAMILY \$ _____

Do you need to make 18 weekly payments? YES NO

Do you need to make 5 monthly payments? YES NO

TOTAL HOUSEHOLD INCOME \$ _____/YEAR

NUMBER OF WAGE EARNERS _____

NUMBER OF CHILDREN IN FAMILY PLAYING FOR ISFC _____

BRIEFLY DESCRIBE WHY FINANCIAL AID IS BEING REQUESTED FOR THIS PLAYER:

PLEASE LIST 3 REFERENCES (NON-FAMILY MEMBERS)

NAME	EMAIL ADDRESS	PHONE NUMBER
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Your signature below acknowledges that all of the information on this application is accurate as of the date indicated and that you have read and agree to all financial assistance requirements.

PARENT SIGNATURE _____

DATE: _____

FINANCIAL ASSISTANCE APPLICATION IS DUE JANUARY 18, 2021 FOR THE 2020-2021 SEASON.

Please print, make a copy for your records and mail to:

**ISFC
PO BOX 264
JASPER, IN 47546**

Please contact ISFC with questions: soccerisfc@gmail.com