

# PLAYER ASSISTANCE PROGRAM

Thompson Soccer Association is interested in assisting players with financial needs. In order to do that we need the families to provide proof of financial status from one of the following agencies: School District Free/Reduced lunch program (present a copy from the district) or House of Neighborly Services Form. Proof of income status is due within one week after tryouts. Player Assistance is subject to approval by the Player Assistance Program Committee. Notification will be sent in writing prior to the first day of registration.

We do not guarantee any exact dollar amount, until all applications have been reviewed by the committee and families are notified. Our goal is to help as many families as possible with very limited funds.

Please fill out the following information:

1. Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Team\_U \_\_\_\_\_
2. Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Team\_U \_\_\_\_\_
3. Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Team\_U \_\_\_\_\_
4. Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Team\_U \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Parent(s) Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address: (PRINT) \_\_\_\_\_

Number of Adults in your household \_\_\_\_\_ Number of children in your household \_\_\_\_\_

Reason for applying:

\_\_\_\_\_  
\_\_\_\_\_

(if more space is required please use back of this form or attach a letter)

Your family will be notified prior to Club United registration of exactly how much financial assistance you will receive from TSA. Please remember that all players who apply will be considered for assistance. With our limited funding we will assist as many families as possible.

***In order to receive financial assistance a player and/or family must agree to assist TSA throughout the season. Please indicate how you would like to volunteer your time:***

***Team Manager*** \_\_\_ ***Post Game Field Clean Up*** \_\_\_ ***Assist with end of the year party*** \_\_\_

***Assist with advertising*** \_\_\_ ***Assist with extra activities such as 3V3 summer activity*** \_\_\_

***Other ways you would like to help TSA*** \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_