

ASHLAND YOUTH SOCCER LEAGUE
FINANCIAL ASSISTANCE

Dear Parent/Guardian,

AYSL is a non-profit organization that strives to provide a quality soccer program to any youth who wishes to play. AYSL offers both full and partial financial assistance for the 2008/2009 soccer seasons.

To apply for financial assistance, you will need to do the following:

1. Complete the enclosed application with current and accurate information.
2. Enclose one of the following personal financial documents that demonstrate your need:
 - Proof of eligibility for reduced or free school lunch.
 - Proof of eligibility for WIC program or food stamps
 - Subsidized/Habitat for Humanity housing documentation
 - If you are unable to provide any of the above, please include a copy of your most recent IRS tax statement.
3. Secure all information with this application (including Letter of Intent and Volunteer Form) and return it to AYSL at PO Box 2152, Ashland, VA 23005.

Applications will not be considered unless all requested documentation is submitted.

Please feel comfortable that all financial information received by this office is held in strictest confidence.

Feel free to email the board president (endovet@aol.com) treasurer (brcline@hotmail.com) vice president (stiles.rob@gmail.com) or registrar (diane@edusoft-lc.com) should you have any questions or concerns. Please allow ten (10) business days for your application to be processed. After this period, you will be contacted as to the status of your application.

Sincerely,

Diane Kellogg
Club Administrator

Ashland Youth Soccer League Financial Assistance Application

Please print all information clearly. Attach additional sheets as necessary.

Part 1:

Player's Name: _____ Age group: _____

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____ Evening Phone : (____) _____

Employer: _____ Work Phone: _____

Email: _____

List full names and ages of all dependents in the household:

Full Name	Date of Birth	Gender
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Part 2:

Documentation (please attach copies) demonstrating financial need --WIC statements, divorce/separation papers, eligibility for reduced school lunch fees, etc.

You may also list any other information that would be helpful to the Financial Assistance Committee on a separate sheet.

Part 3:

We are applying for Financial Assistance for:

Fall Season
 Spring Season

What dollar amount do you feel you can afford to pay? _____

Are you willing to volunteer in any capacity for AYSL? _____

Part 4

Everyone providing information on this form must sign below.

Father's (Stepfather's) Signature: _____ Date: _____

Mother's (Stepmother's) Signature: _____ Date: _____

This form must be returned to AYSL. Please mark envelope "PERSONAL & CONFIDENTIAL".

**To: Ashland Youth Soccer League
C/O Financial Assistance
PO Box 2152
Ashland, Virginia 23005**

All submitted information will be reviewed by the Financial Assistance Committee and will be held in the strictest confidence.

For Internal Use Only: Date Received: _____
Date Reviewed: _____ Approved: _____ Denied: _____ Amount Approved: _____
Notification Sent: _____

VOLUNTEER OPPORTUNITIES

Please check any and all that you would be interested in:

Please also register online to volunteer as team parent or to assist with field preparation.

Field Preparation

_____ At the beginning of each season, a group of board members and volunteers layout and line the fields for the new season.

Team Parent

_____ Coaches administrative assistant. Sets and distributes snack schedule, and reminds parents. Helps keep the team's field lined. Recruits other parents for weekly lining of their team's field (when necessary). Helps notify team families of any schedule changes (practice rain-out, game rescheduling, etc)