



Allen Sports Association

Financial Aid Information & Instructions

950 E. Main St.
 Allen, TX 75002
 (972) 727-9565
 Fax (972) 727-9760
www.allensports.org

*****Please read and follow instructions*****
 Initial and sign before filling out the application.

The Allen Sports Association awards financial aid to families from Allen, Lucas and Fairview who qualify based on income and family size.

Initial

<input type="checkbox"/>	Applicants seeking financial aid must submit a new application with required documentation for each season.
<input type="checkbox"/>	What it covers: Financial aid only covers the cost of registration for each sport. All uniform, equipment or other supplies needed for participation are the responsibility of the player/parent unless otherwise specified.
<input type="checkbox"/>	Per player cap: Players may qualify for financial aid for 1 (one) sport per season, not to exceed 2 (two) sports per year.
<input type="checkbox"/>	Deadlines: Applications for financial aid are due no later than 2 (two) weeks prior to the end of regular registration. All applications MUST be turned in by the deadline specified for each sport for each season. The specific deadline dates can be found at the ASA website at www.allensports.org or by calling the ASA office at (972) 727-9565. Applications will not be accepted after the deadline has passed. <i>There will be no exceptions.</i>
<input type="checkbox"/>	All approved financial aid recipients will be required to pay a minimum fee of \$50 (per player fee) regardless of financial need.
<input type="checkbox"/>	Sport Registration: You will register your child in person at the ASA office <u>AFTER</u> you have been notified that your application has been approved.

<input type="checkbox"/>	<p>Required documentation: All required documentation must be submitted at the same time as the application. We will not accept applications that do not have the proper documentation attached. Required documentation is as follows:</p> <p>1. INCOME DOCUMENTATION: Copy of most current years' tax return (pages 1 & 2 of Tax Form 1040, signature required on the second page).</p> <p>2. RESIDENCY DOCUMENTATION: Copy of most recent utility bill or Copy of mortgage statement or rental/lease agreement</p>
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Checklist

<input type="checkbox"/>	Application: All information must be complete and legible on the application. Any false or missing information may disqualify the child(ren) for financial assistance.
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I have read and understand the above instructions for applying for financial aid.

SIGNATURE OF APPLICANT

DATE



Allen Sports Association

Financial Aid Application

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Please Print Legibly

STEP 1: Complete the financial aid application and submit with the required documentation to the ASA office by the posted deadline. Incomplete or late applications will not be considered.

1. INCOME DOCUMENTATION: Copy of most current years' tax return (pages 1 & 2 of Tax Form 1040, signature required on the second page).

2. RESIDENCY DOCUMENTATION: Copy of most recent utility bill **or** Copy of mortgage statement or rental/lease agreement

STEP 2: If approved, registration must be made in person at the ASA office. All applicants will be required to pay a minimum \$50 fee for registration.

1. PRIMARY APPLICANT: The primary applicant is the main provider for the child(ren) seeking assistance.

Your Name: _____
First Middle Initial Last

Social Security Number (optional): _____ Date of Birth ____/____/____

Street Address: _____ Apt./Unit # _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____ Message Phone: (____) _____

Email Address: _____

2. OTHER ADULTS: Please list all other parents, step-parents, grandparents or guardians who live with the child(ren).

First Name	Last Name	Relationship to Child (Please circle one)			
_____	_____	Parent	Step-Parent	Grandparent	Other
_____	_____	Parent	Step-Parent	Grandparent	Other
_____	_____	Parent	Step-Parent	Grandparent	Other
_____	_____	Parent	Step-Parent	Grandparent	Other

3. DEPENDENT CHILD(REN): Please list *all* dependent children living in the primary applicant's home.

First Name	Last Name	Sport	Age	Grade	Sex	Date of Birth
_____	_____	_____	____	____	____	____/____/____
_____	_____	_____	____	____	____	____/____/____
_____	_____	_____	____	____	____	____/____/____
_____	_____	_____	____	____	____	____/____/____
_____	_____	_____	____	____	____	____/____/____
_____	_____	_____	____	____	____	____/____/____

4. INCOME: Please list *all* income received from all adults listed in sections 1 and 2 including, but not limited to, income from jobs, social security, child support, alimony and government assistance programs. We require a copy of the most current years' tax return as proof of income.

Name of Person Receiving Money		Employer Name OR Sources of Income	How Much?	How Often? (circle one)	
_____	_____	_____	\$ _____	Weekly	Every 2 weeks
First	Last	_____	\$ _____	Twice a month	Monthly
_____	_____	_____	\$ _____	Weekly	Every 2 weeks
First	Last	_____	\$ _____	Twice a month	Monthly
_____	_____	_____	\$ _____	Weekly	Every 2 weeks
First	Last	_____	\$ _____	Twice a month	Monthly
_____	_____	_____	\$ _____	Weekly	Every 2 weeks
First	Last	_____	\$ _____	Twice a month	Monthly
_____	_____	_____	\$ _____	Weekly	Every 2 weeks
First	Last	_____	\$ _____	Twice a month	Monthly

I certify that the aforementioned information is true and complete to the best of my knowledge. I agree to inform the Allen Sports Association immediately of any changes in income or family size. I understand that false information will disqualify my family for financial assistance.*

Printed Name _____

Signature _____

** Allen Sports Association's financial aid is a privilege and we reserve the right to ask for additional information.*

FOR OFFICE USE ONLY

Approved Percentage: _____ %

Amount ASA Will Pay \$ _____

Amount Applicant Needs To Pay \$ _____

Approved By _____

Date Approved _____