



NEEDS BASED ASSISTANCE APPLICATION FOR MLS NEXT & GIRLS ACADEMY

It is not the intent of LA Elite Soccer Program to turn any child away due to their inability to pay the required fees, therefore we offer need based assistance if funds are available. Applications cover one year only. Assistance awarded in a previous year does not guarantee assistance for the next year.

Any assistance granted ONLY covers team dues. LA Elite Soccer Programzz does not offer any assistance or discounts on team expenses or team uniforms.

Complete this form and mail, fax, or email it (information listed below). All information will be kept confidential.

Primary Parent/Guardian (Applicant) Information:

Name _____ Home Phone _____ Cell Phone _____

Full Home Address _____

Employer _____ Work Phone _____ E-mail _____

Parent (2) Information:

Name _____ Home Phone _____ Cell Phone _____

Home Address (if different) _____

Employer _____ Work Phone _____ E-mail _____

Are you a single parent household? () Yes () No

Have you ever applied for financial assistance before at your Home Club? () Yes () No

<u>PLAYER'S NAME</u>	<u>DATE OF BIRTH</u>	<u>zClub Association</u>	<u>(BRSC, etc.)</u>
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1. _____

2. _____

3. _____

4. _____



BRSC may cover up to 50% of program costs unless there are special circumstances (please check % of assistance requested though you are not guaranteed the full amount requested).

☐ 15%

☐ 25%

☐ 50%

Other: _____
(Please specify dollar amount)

Briefly describe your financial situation indicating why you are seeking assistance (attach additional pages if necessary): _____

Special circumstances you would like **xz** to consider in awarding your scholarship (attach additional pages if necessary): _____

What is your total Adjusted Gross Income (AGI) based on the most recent year's Federal Income Tax Return?

\$ _____

A copy of your most recent year's Federal Income Tax Return (2020) and/or your SSI allocation statement (with state human services ID number) **MUST** be submitted along with this completed form or your application will be returned to you (We only need the first two pages of your return.) If you have not yet filed your 2020 Federal Income Tax Return you may submit your 2019 Federal Income Tax Return along with proof of income for 2021. If you are currently unemployed, you must submit proof of such.

Additional required information:

Your 2 most recent paystubs

Your application WILL NOT be accepted if the above documents are not included.



By completing this application I understand that I am responsible for 100% of team expenses as well as uniforms and hereby certify that I am able to pay these fees. Initial here if you agree _____

I hereby certify that I am the parent/guardian of the above named player and that need the financial help as requested above. If requested, I will provide additional financial documentation of my need to **LA-ESP**.

Signature of Applicant

Date

Mail Completed Form to: BRSC
Attn: Hannah Gill
142 Lobdell Ave.
Baton Rouge, LA 70806
Or fax to: (225) 924-5674
Or e-mail to: hgill@brsoccer.org

FOR OFFICE USE ONLY

Date received _____

Reviewed by the following BRSC representatives:
Name Date

Tax information provided	Yes	No	_____	_____
2 current paystubs provided	Yes	No	_____	_____

Assistance amount requested \$ _____

Assistance amount granted \$ _____

Applicant notified by (circle one): Phone Mail Email
Date applicant notified _____ by _____

Bal ance due on account \$ _____ Date paid _____

Notes: _____

