



Request for Financial Assistance- TBAYS

TBAYS has a limited amount of funds for those families needing help with soccer fees. Please provide the following information so that we may determine the organization's ability to assist you. No financial assistance requests will be considered without a completed form. TBAYS cannot guarantee your request.

Forms must be turned into the TBAYS office.

This form should be submitted to:

TBAYS, Traverse Bay Area Youth Soccer
160 Hughes Dr.
Traverse City, MI 49686

Parent's / Guardian's Name _____

Address _____

Phone Number _____ Email: _____

Address _____

Player's Name _____ Grade _____ TBAYS Team _____

of Household members _____ Adjusted gross income \$ _____

Please give a brief explanation of the reason for this request. For example: *My recent hospitalization has caused an unforeseen financial hardship for our family.*

Because our funds are very limited, we ask that all families contribute to their fees if possible, and/or provide us with volunteer assistance. Please let us know your financial aid needs.

The TBAYS Financial Aid committee will review all applications and distribute our funds across all qualifying applications. You will be notified within 30 days if you will receive financial aid and in what amount.

Revised: 9/21/04