

Request for Financial Assistance

Financial assistance is available to assist those players who are not able to afford the total costs associated with Registration. Therefore, MN Rush allots a specific amount of money each year to help those families with who are in need.

Financial assistance is on a first-come, first served basis and once the financial assistance funds are gone for the season, no more aid can be given. For each program the club aims to cover 60% of the registration cost, leaving 40% for the family's responsibility. Families need to keep in mind, that players playing Competitive soccer league will need to purchase a uniform (roughly \$170) and they will have additional costs for tournaments.

The primary criterion for qualifying for financial assistance is eligibility/participation in the Free and Reduced Lunch Program. **When applying for financial assistance, please submit a copy of your letter with this request.** In lieu of proof of eligibility/participation in the Free and Reduced Lunch Program, applicants for assistance are asked to write a letter of explanation as to why they are seeking consideration for aid.

Applicants for financial assistance must be made by a player's parent or guardian. Financial assistance applications will be held in confidence between the parent/guardian and MN Rush.

PLAYER INFORMATION

Name:
Birth date:
Current Grade:

PARENT/GUARDIAN CONTACT INFORMATION

Name:
Phone Number (home/cell):
Email address:

FINANCIAL AID REQUEST INFORMATION

Program Name:
Amount of assistance requested (registration fee – amount paid = amount of request):

DEADLINE FOR SUBMISSION: Within one week of the end of the online registration period for the season that financial aid is being requested. Please remember that aid will be granted on a first-come, first-served basis, based on acceptance of each requestor's reason for eligibility.

PARENT/GUARDIAN ACKNOWLEDGEMENT: By signing below, I acknowledge that I have read this form and understand the terms of being considered for financial assistance for RYSA recreational soccer programs. I also understand that there are certain expectations that I must meet as a recipient of financial assistance.

Parent/Guardian Signature

Date