



Player Name: _____

Birth Date: _____

Financial Assistance Program

Objective: Rush Union strives to keep soccer affordable and to reduce the economic barriers to playing the game. As such, as long as funds are available, Rush Union will make financial assistance available to qualifying players and their families.

- Fee amounts will be based on demonstrated need
- Assistance will be reviewed on a per person basis and must be applied for each year.

Administration: The Financial Assistance Program will be under the direct supervision of the Rush Union Financial Assistance Committee.

Criteria: Any family who has an economic barrier that prevents a player from participating can apply.

Need: Financial need will be assessed and taken into consideration in awarding assistance:

- Applicant must complete the required application form and return the club administrator at the player's home location (See Administrator contact emails below)
- **Applications for returning Rush Union players are due on or before May 15**
- Applications for new players to Rush Union are due on the last day of tryouts
- Certain financial documentation is REQUIRED in order to be considered. Information will be kept private and confidential
- Required documentation includes:
 1. Previous year tax return, front page only, with social security number blacked out.
(Note: families with household income of more than \$60,000 generally don't qualify.)
 2. Other supporting documentation for additional hardship (job loss, medical bills, etc.)
- Failure to submit the required documentation will delay consideration of your application

Other Fees: Families are responsible for paying any uniform, camp, tournament or other team fees.

Non- Discrimination Clause: No one will be disqualified from consideration because of sex, race, color, creed or religious beliefs.

Payment Pplicy: Rush Union has a No Pay, No Play Policy. Monthly payments must be kept up to date in order for a player to continue to practice and play games.

Milton Administrator: Cara Murray at cmurray@rushunionsoccer.org

Dunwoody Administrator: Juliet Melvin at jmelvin@rushunionsoccer.org



Player Name: _____

Birth Date: _____

Rush Union Financial Assistance Application

1. Player Name: _____

2. Team/Birth Year: _____ Coach _____

3. Are any siblings applying? _____

4. Parent/Guardian Name: _____

5. Parent/Guardian Email and Phone: _____

6. Parent occupation/employer: _____

7. Are you a single income family? _____

8. Please use the space below to explain financial circumstances:

9. Current household annual income: _____

10. Please list what you feel you can afford to pay per month: _____

11. List any services you would be able to provide to the club in exchange for volunteer hours:

Please review the application for accuracy and completeness. By signing below, I confirm I understand the scholarship program requirements as stated. I further confirm the information above is true, accurate and correct.

Further, I understand that by completing the application a scholarship may or may not be awarded and the application and supporting documents must be reviewed in full. The applicant will be notified by email if a scholarship has been granted.

****APPLICATIONS WILL NOT BE PROCESSED WITHOUT SUPPORTING FINANCIAL DOCUMENTS (ie-Tax Return)**

Parent/Guardian Signature: _____ Date: _____

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For internal use only:

Approved: Yes No

Amount of Scholarship: _____ Team: _____