



Spokane Sounders - SSC Shadow Select - Sounders Homegrown 2016-2017 Season Financial Assistance Application

Participant's Name:	
Age Group:	
Team/Program Name:	
Parent/Guardian Name:	
Parent/Guardian Address:	
Parent/Guardian Telephone Number:	
Parent/Guardian Email Address:	
Parent/Guardian Name:	
Parent/Guardian Address:	
Parent/Guardian Telephone Number:	
Parent/Guardian Email Address:	
2016 Household Size*	
2015 Annual Income**	

*Household size defined as total number of exemptions per line 6 on the IRS Form 1040(s)

**Annual income defined as total income per line 22 on the IRS Form 1040(s)

Submission Deadlines: Financial Assistance submission **registration deadline is May 31, 2016**. All paperwork must be completed and **turned in by June 20, 2016**.

Applications: Spokane Shadow Youth Soccer Club, a Washington non-profit corporation (“SSC Shadow”) provides a limited amount of financial assistance to children (participants) whose families are unable to pay the full cost of registration fees. SSC Shadow grants financial assistance on the basis of financial needs (NOT player ability) and requires information to determine the need for financial assistance.

In order to be considered for eligibility, the participant’s family calendar year annual income** must be within the income eligibility guidelines for the calendar year ended 2015:

Household Size*	Annual Income Eligibility**
1	\$21,978
2	\$29,637
3	\$37,296
4	\$44,955
5	\$52,614
6	\$60,273
7	\$67,951
8	\$75,647

*Household size defined as total number of exemptions per line 6 on the IRS Form 1040(s).

**Annual income defined as total income per line 22 on the IRS Form 1040(s).

For participants who do receive free or reduced lunch, financial assistance may cover a percentage or **up to 100%** of registration fees, subject to availability of SSC Shadow financial assistance funds.

For participants who do not receive free or reduced lunch, financial assistance may cover up to a **maximum 50%** of registration fees, subject to availability of SSC Shadow financial assistance funds.

The following documents, collectively known as the “Financial Assistance Application”, must be submitted in their entirety for consideration for financial assistance.

- SSC Shadow Financial Assistance form
- Internal Revenue Service Form 1040 (or Form 1040’s) for 2015 for the parent/guardian(s) who claim(s) participant as a dependent on their tax return. If married filing separately, both parents Form 1040’s must be included. If divorced, the parent who claims the participant as a dependent for tax year 2015 must be provided.

Although not needed at the time of the initial application, SSC Shadow does reserve the right to request the following information if needed for income verification:

- All W2’s, 1099’s and other documents that support total annual income.
- Internal Revenue Service Form 4506 Request for Copy of Tax Return authorizing SSC Shadow to obtain copy of Form 1040(s) submitted to the Internal Revenue Service.

The “Financial Assistance Application” should be mailed to:

SSC Shadow
PO BOX 18176
Spokane, WA 99228

Incomplete Financial Assistance Applications will be returned and the applicant will be asked to provide the information. Complete Financial Assistance Applications are considered for financial assistance at SSC Shadow’s sole discretion and any financial assistance is subject to availability of financial assistance funds. Any financial assistance that may be

granted will be based entirely on the income and information stated in this Financial Assistance Form. Extenuating circumstances may be considered, at the sole discretion of SSC Shadow.

Participants will not be allowed to begin practicing or playing games without obtaining a letter (can be via email) from SSC Shadow that states a completed Financial Assistance Application has been submitted for consideration of financial assistance. A letter will be provided (can be via email) by SSC Shadow when a completed Financial Assistance Application is submitted.

If less than full financial assistance is offered to a participant, the participant must make payment/remain current with all remaining registration fees in order to continue receiving financial assistance. Participants who are not granted financial assistance will be required to make payments/remain current with all registration fees prior to practicing or playing games per the SSC Shadow No Pay/No Play policy. Participants must complete registration via SSC Shadow standard online registration before financial assistance can be reviewed. Please note that Financial Assistance Applications must be completed for each seasonal year.

Uniform Charges: Any financial assistance provided for registration fees does not cover and/or include uniform charges. Participants will be responsible to pay all required uniform charges in full.

Team Charges: Any financial assistance provided for registration fees does not cover and/or include individual team charges. Participants will be responsible to pay all team specific charges in full.

Privacy Statement: SSC Shadow will use the information provided for financial assistance purposed only. The information will not be shared with any parties outside of SSC Shadow.

Non-discrimination Statement: SSC Shadow does not discriminate on the basis of race, color, religion, nation origin, sex, age or disability. Any financial assistance offered is at the sole discretion of SSC Shadow.

Financial Assistance Withdrawal and Eligibility Termination: Financial assistance will be withdrawn by SSC Shadow in the event any information provided in a Financial Assistance Application is found to be incorrect, and participants will be removed from SSC Shadow activities for the current and all future activities. Financial assistance will also be withdrawn by SSC Shadow if the participant's family does not remain current in all club dues and registration fees that are not covered by financial assistance, or if the participant does not finish the current seasonal year with SSC Shadow. In the event that financial assistance is withdrawn by SSC Shadow, for any reason, the undersigned acknowledges and agrees that they will be responsible to pay back the full amount of the financial assistance awarded. By applying for financial assistance, the undersigned further expressly consents to and understands that participants will be removed from current activities and will not be allowed to participate in any future activities of SSC Shadow if information provided in a Financial Assistance Application is found to be incorrect.

I have read, understand, and consent to the terms and conditions of SSC Shadow's financial assistance policies.

Parent/Guardian Name (Print):	Signature and Date:
Parent/Guardian Name (Print):	Signature and Date: