

Confidential

Mustang Soccer League
2018 FINANCIAL AID APPLICATION
SUBMISSION DEADLINE: June 15, 2018

Submit completed application to:

Mustang Soccer League
Financial Aid Committee
PO Box 1827
Danville, CA 94526

Application Date: _____

A. Player Information:

Name _____ Date of Birth _____
Address _____ City _____ State _____ Zip _____
School _____ City _____ Grade _____
Home Phone () _____ Cell Phone () _____ E-Mail _____
Playing Level: _____ Elite _____ Premier _____ Rec Plus _____ Recreational

B. Parent Information

1st Parent's Name _____ E-mail _____
SSN: - - - - -
Address _____ City _____ State _____ Zip _____
Work Phone () _____ Cell Phone () _____ Home Phone () _____
Employer _____

2nd Parent's Name _____ E-mail _____
SSN: - - - - -
Address _____ City _____ State _____
Work Phone () _____ Cell Phone () _____ Home Phone () _____
Employer _____

List all children in your family and whether they are registered with the Mustang Soccer Club:

Name _____	Age _____	School _____	MSL Player? Current / Former / No
Name _____	Age _____	School _____	MSL Player? Current / Former / No
Name _____	Age _____	School _____	MSL Player? Current / Former / No
Name _____	Age _____	School _____	MSL Player? Current / Former / No

Do any of your children play in other sport club programs? Yes / No
If yes, please list any Financial Aid they receive aid there _____

C. Assessment of need:

Is your current financial situation temporary or permanent? Y/N Explain _____

Are you a single income or multiple income family? Single / Multiple Explain: _____

Father/Stepfather's State of Legal Residence: _____

Mother/Stepmother's State of Legal Residence: _____

Have you completed a 2017 IRS Income Tax return or other Income Tax return? _____

What Income Tax return was filed or will be filed for the 2017 year? _____ IRS 1040 _____ IRS 1040A 1040EZ _____ foreign tax return
_____ tax return with Puerto Rico or other US Territory

Submit your signed and completed application, along with required documentation (copy of the front page of your 2017 filed federal tax return or copy of 1099s/W2 forms if you have not yet filed) in order to be considered by the deadline to:

Mustang Soccer League
Financial Aid Committee
PO Box 1827
Danville, CA 94526

Please direct any questions you might have to: Jen Michel jmichel@mustangsoccer.com 925-648-4121 Ext. 14

For MSL Financial Aid Committee Use Only

Date Application Received _____ Approved For \$ _____

Denied, Reason: _____

Signatures: _____ Print Name _____

Signatures: _____ Print Name _____

Signatures: _____ Print Name _____

Signatures: _____ Print Name _____

Date Review Completed _____ Family Informed of Result on Date: _____

Method: Phone call / e-mail / US Mail / In Person By _____

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