



Summer 2006 FINANCIAL AID REQUEST FORM

Due by March 1, 2006

Westside Football Club is committed to offering limited assistance for soccer registration to give all youth an opportunity to play soccer. *We do not pay for uniforms as part of this assistance.*

(Please PRINT legibly) please circle:

1) Player Name (First/M.I./Last) _____ Birth date _____ M/F New/Returning

2) Player Name (First/M.I./Last) _____ Birth date _____ M/F New/Returning

3) Player Name (First/M.I./Last) _____ Birth date _____ M/F New/Returning

Address _____ City _____ Zip _____

Parent/Guardians _____

Phone: Home () _____ Day () _____ Cell () _____

E-Mail Addresses _____

By accepting financial aid, I am making a commitment to the team and will help my child attend all practices and games or contact the coach and/or manager if they are unable to attend. Future financial aid will be influenced by this commitment.

Signature of Parent or Guardian (required) _____

Describe need for financial aid (required):

Amount that can be paid for above players:

1) _____ 2) _____ 3) _____

All information will be reviewed by the scholarship committee and kept strictly confidential.

Complete this application and include with registration. Incomplete registrations will be returned and delay decisions for aid. A decision will be made by March 1, 2006. Westside Club Policy states that passes will not be issued to players until fees are paid, payment schedules, and or financial aid requests are approved.

Mail to: Kim Sturdy Registrar
Westside Football Club
8763 Queens Gardens North
Brooklyn Park, MN 55443

Questions? Kim Sturdy (763-493-5857), registrar@westsidesoccer.mn.org

APPROVED: _____ **DATE:** _____