



# NCUnited Soccer Assoc. Financial Assistance Guidelines, Policy, and Application

## Definition

NCUnited Soccer Assoc. is a non-profit organization committed to the development of youth soccer players. These guidelines are to provide soccer opportunities to all youth, regardless of the ability to pay, to the extent that Financial Assistance funds are available. The below financial assistance guidelines are only applicable for Challenge (CH), Select (SL) and Classic (CL) levels of play. RECreation level of play financial assistance is at the discretion of the Director of REC.

## Composition (responsibility)

Financial Aid Chairperson (primary responsibility)

- Appointed by the President at the beginning of each season from the available Board members.
- Financial Aid Determination and communication to participants.

Treasurer

- Determines budget for Financial Assistance Funds available for a given season.
- Input of the assistance amounts (scholarship) into the Payment System.

Committee Members

- To be determined by the chairperson, if needed for each season.
- Not more than 3 members: Financial Aid Chairperson + Board member + one (1) other.

Special Events Coordinators

- Recording of who (player, how long) volunteered for a given event.

## Deadlines

*Applications for financial assistance must be received by:*

- *FALL Competitive: June 25<sup>th</sup> → Award Notification by 31 July*
- *SPRING Competitive: January 25<sup>th</sup> → Award notification by 31 Jan*
- *Applications submitted after these deadlines for the particular programs will be reviewed periodically and award will be based on the availability of Financial Assistance funds.*

## Required Payments

- *All families are required to pay, at a minimum, the tryout/registration fees AND 100% of the POSITION Acceptance fee on their child's NCUSA Clubs fees. These fees are not covered by Financial Assistance.*
- *Financial Assistance amounts awarded to a family/player will NOT be recorded until:*
  1. *Required payments are received OR*
  2. *Payment plan has been setup to pay these required fees (and paid on time) AND*
  3. *VOLUNTEER hours have been confirmed completed.*

**Failure to complete these items could result in revocation of your financial assistance award.**

## Award Confirmation

Financial Assistance awards notification will occur via (1) EMAIL or if there is a lack of email address (2) USPS mail.

Please ensure all addresses (email, physical, mailing, etc.) are correct.

**Failure to provide all of these items could result in revocation or delay of your financial assistance award.**

## NCUSA Club Fees NOT Covered by Financial Aid

Financial Assistance does NOT cover:

- Tryout/Registration Fees
- Position Acceptance Fees
- Uniforms
- Personal equipment
- Team fees including but not limited to tournament fees.

## Required Documentation

To ensure fairness for all applicants, the parent or legal guardian must provide **NCUSA ALL the following:**

- Financial Assistance Application (below)
- A copy of the most recent Federal Tax Form filed and Federal Extension Form filed (if applicable)

- A copy of all W-2s or 1099 forms from all employed household family members
- A copy of the **two** most recent pay stubs for all employed family members
- A copy of any court orders regarding financial responsibility for this player, IF APPLICABLE.
- **Failure to provide all of these items could result in revocation or delay of your financial assistance award.**
- **NCUnitedSA will not return any documents, please make copies.**

**Required Volunteerism**

- Families are expected to volunteer at least ONE (1) hour for every \$100 of Financial Assistance. This requirement can easily be met during tournaments, tryouts and other special events that NCUSA hosts.
- Each recipient must volunteer a minimum of 2 hours.

**IMPORTANT Guidelines:**

- Financial assistance is not guaranteed from year to year.
- An application for financial assistance does not guarantee that assistance will be granted.
- Families are expected to pay any remaining balance due according to NCUSA's regular club-payment schedule unless otherwise agreed upon.
- Any players with an unpaid balance from any previous year owed either to the club will not be placed on a team, nor will their Financial Assistance application be considered, unless and until any balance is paid in full.
- Parents must immediately contact NCUSA should their financial status change at any time during the season(s).
- The application and supporting documents will be viewed only by the Financial Assistance Committee and will be held in utmost confidence.
- NCUSA reserves the right to discontinue financial assistance at any time if the information provided is found to be incorrect.
- **Failure to provide all of the requested information could result in revocation or delay of your financial assistance award.**

**SUBMIT to**

Please submit completed applications to:

NCUSA  
 c/o: Financial Aid  
 P.O. Box 928  
 Welcome, NC 27374

**Questions, Comments, Concerns**

[FinAidChair@NCUnitedSoccer.com](mailto:FinAidChair@NCUnitedSoccer.com)

**APPLICATIONS**

Please complete the application as thoroughly and as accurately as possible. Missing or incomplete information will delay decisions OR could result in immediate denial of your request.

- **Failure to provide all of the requested information could result in revocation or delay of your financial assistance award.**

English and Spanish versions available.



# Financial Aid Application

(NCUnitedSA will maintain the utmost confidentiality and privacy.)

Seasonal Year: \_\_\_\_\_

<b>Parental (Applicant) Information</b>		Language Preference:		
Marital Status (circle one)?	Single	Married	Separated	Divorced
Father's Name	_____	Mother's Name	_____	
Address	_____		Address	_____
City, St, ZIP	_____		City, St, ZIP	_____
Home Phone	_____		Home Phone	_____
Cell Phone	_____		Cell Phone	_____
Email	_____		Email	_____

Player Information					
1. Player Name	_____	Date of Birth	_____	Team	_____
2. Player Name	_____	Date of Birth	_____	Team	_____
3. Player Name	_____	Date of Birth	_____	Team	_____
4. Player Name	_____	Date of Birth	_____	Team	_____

<b>Family Financial Information</b>	
Annual Family Gross Income from ALL sources (\$)	_____
Father's Occupation	_____ Employer _____
Mother's Occupation	_____ Employer _____

- Checklist: Failure to provide all of the requested information could result in revocation or delay of your financial assistance award. Submitted documents will not be returned.**
- \_\_\_\_\_ COPY OF MOST RECENT FEDERAL INCOME TAX RETURN
  - \_\_\_\_\_ COPY OF ALL W-2S OR 1099 FORMS FROM **ALL** EMPLOYED FAMILY MEMBERS
  - \_\_\_\_\_ COPY OF THE **TWO** MOST RECENT PAY STUBS FROM ALL EMPLOYED HOUSEHOLD FAMILY MEMBERS
  - \_\_\_\_\_ COPY OF ALL COURT ORDERS REGARDING FINANCIAL RESPONSIBILITY FOR THIS PLAYER, IF APPLICABLE

<b>Questionnaire (please use additional paper as needed)</b>
1. WHAT OTHER INFORMATION OR SPECIAL CIRCUMSTANCES SHOULD BE CONSIDERED BY OUR FINANCIAL ASSISTANCE COMMITTEE?
2. WHAT WAYS COULD YOU SUPPORT THE CLUB, OTHER THAN FINANCIALLY, IF FINANCIAL ASSISTANCE IS GRANTED TO YOUR FAMILY (examples: field maintenance, event concessions, event setup and take down, etc.)?

I certify that all information submitted is true to the best of my knowledge. I understand that this application does not guarantee assistance. I also have read and agree to the guidelines set forth in this application if financial assistance is awarded.

Signature \_\_\_\_\_ Date \_\_\_\_\_