

SBSC Financial Aid Application Form



Please complete and return with proper paperwork to:

For Travel program:
 S. Brunswick Soccer Club
 P.O. Box 5292
 Kendall Park, N.J. 08824

For In-Town program:
 S. Brunswick Soccer Club
 P.O. Box 5
 Kendall Park, N.J. 08824

Player Information

Player's Name	
Parent/Guardian Name(s)	
Address	
Phone	
E-Mail Address	

Aid Information (Aid covers registration fee only, uniform & equipment fees are responsibility of parent/guardian.)

For which South Brunswick Soccer Club program are you requesting financial aid? (Select only one)

- Travel Soccer Program In-Town Soccer (Recreation) Program

Did your child participate in the free or reduced fee lunch program at school?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total Registration Fees:	\$	Amount of Aid Applied for:	\$
Payment plan requested?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes – Proposed monthly payment:	

Reason(s) for Aid (use the back or attach separate sheet if necessary)

Agreement and Signature

I hereby certify that the statements on the form are true to the best of my knowledge.

Name (printed)	
Signature	
Date	

Our Policy

Please note that the SBSC is a state and federally registered non-profit organization. As such, we make every effort to prevent our fees from being price-prohibitive, but also so have significant costs that have to be paid to ensure that we remain a high quality program. **Financial aid applications will only be considered if submitted at the try out stage**, and must be accompanied by copies of the most recent W2 and tax return for the primary household wage earner. For special situations contact treasurer@sbsoccer.org