



***For USLA Admin Office ONLY***

Received Date: \_\_\_\_\_  
 Verified By: \_\_\_\_\_  
 Qualified: Yes No

USLA is committed that every child with the desire, commitment, and ability to play be afforded the opportunity regardless of financial ability. USLA offers a very competitive and affordable program as a standard across the board, however there is an additional scholarship discount that can be awarded based on eligibility. In order to be considered for the Scholarship Discount, this form must be submitted along with your registration form or, may apply for assistance.

**SCHOLARSHIPS AVAILABLE FOR:**

50% Player Discount- student is currently enrolled in the Federal Lunch Program as FREE or REDUCED.  
 Student Lunch # \_\_\_\_\_; School Enrolled in 2016-2017 \_\_\_\_\_; School District Name \_\_\_\_\_.

**OR**

50% Player Discount- Copy of 2015 Federal Tax Return to verify income eligibility for FREE or REDUCED Federal Lunch Program (see <https://www.gpo.gov/fdsys/pkg/FR-2016-03-23/pdf/2016-06463.pdf> ).

**PLUS**

\$100 Per Player Discount if 3 or more siblings registered in USLA Academy or Premier Teams in program season.

**SEVERE FINANCIAL HARDSHIP REQUEST:**

50% + Player Discount (case-by-case basis) for a player whose family is at or below the U.S. published poverty income level (see <https://www.gpo.gov/fdsys/pkg/FR-2016-03-23/pdf/2016-06463.pdf> ).

I can pay \$ \_\_\_\_\_ per month for \_\_\_\_\_ months \_\_\_\_\_ per child (if applicable).

**OR**

50% + Player Discount for a player whose family experienced unforeseen/ extraordinary financial hardships. I can pay \$ \_\_\_\_\_ per month for \_\_\_\_\_ months \_\_\_\_\_ per child (if applicable).

**OR**

100% Player Discount- 16 years old or older and wish to participate in the USLA Work-Play Internship Program.

**\*\*\*Scholarships & Financial Hardship Assistance are awarded on an annual basis and will not be considered valid unless approved by USLA DOA and/or Treasurer.**

The following information must be provided (incomplete applications will not be considered):

**July 1, 2016: Financial assistance applications are due (or on date registered if after July1st)**

Completed applications should be turned in during registration or sent to: **ATTN: USLA Financial Assistance Committee, PO BOX 100597, San Antonio, TX 78201 or by email to: [champions@uslasoccer.org](mailto:champions@uslasoccer.org)**. Notification on application status will be upon registration or communicated in writing within two weeks of application submittal.

Player Name \_\_\_\_\_ Player Name \_\_\_\_\_  
 Player Name \_\_\_\_\_ Player Name \_\_\_\_\_  
 Parent/Guardian's Name \_\_\_\_\_  
 Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
 Primary Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Primary email address \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 \*2015 Annual Family Household Income (Required) \$ \_\_\_\_\_ Household Size \_\_\_\_\_

I understand by submitting this application that I may be requested by USLA to assist with volunteer and community service. I will, to the best of my ability, fulfill these requests during the program year. I also verify that the information provided on this application form is true and correct and understand the penalties for representing false or incorrect information regarding the Federal Lunch Program and US Poverty Guidelines. Furthermore, I understand by FILING this Scholarship Application, that it in no way guarantees an award by the USLA. All financial assistance awarded is at the absolute discretion of USLA. All fees, net of any financial assistance expressly received, are due to USLA.

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