

Northshore Youth Soccer Association

Reduced Fee Application for FC Alliance Players

PLAYER(S) NAME	BIRTHDATE

List all current NYSA/FCA players from this family: _____

Please submit the following paperwork to request a reduced registration fee:

Mail to:

Karen Renkert

FCA Administration

11821 NE 145th St, Kirkland WA 98034

or e-mail to krenkert@fcalliance.net

1. This completed application
2. \$20 minimum payment
3. A copy of one of the qualifying documents* listed below:

- Free school lunch program
- Aid for Dependant Children
- Food Stamp Program
- Welfare coupons
- Childcare assistance
- Medicaid

*If you meet government low-income standards, but do not participate in any of the above listed programs, please submit proof of income (last year's IRS form 1040).

Amount you are able to pay per player _____ (\$20 minimum per player)

PARENT/GUARDIAN NAME			
ADDRESS		CITY	ZIP
HOME PHONE	WORK PHONE	EMAIL	
PARENT/GUARDIAN SIGNATURE			DATE

Note: Families requesting scholarship are encouraged to provide volunteer efforts for the team and club.

For Club Use Only

Documentation Reviewed:

_____ Qualifying Documents Submitted

_____ Income Tax Returns

_____ Date Received

Denied

Approved

Club Recommendation: _____ Approved _____ Denied

Club President _____

Club Registrar _____

Club _____

Date _____

Parents notified on _____

Questions? Please contact krenkert@fcalliance.net