

BROOKLYN PARK ATHLETIC ASSOCIATION BASKETBALL PROGRAM - FINANCIAL ASSISTANCE FORM

The Brooklyn Park Athletic Association – Basketball Program is open to all members who choose to participate. Subject to the availability of program resources, no child will be denied participation solely by the reason of financial inability to pay.

Financial Aid Qualifications:

If your and your spouse's income doesn't exceed \$25,000.00 and you have no more than two children, you may be entitled to up to half of the requested member fees (\$45 Elementary, \$55 Jr. High). If you have more than two children under your supervision, it will be determined by the total amount of financial assistance requests received if additional funding will be awarded to your family for added members enrolling.

Note: There are limited program funds available to support the financial assistance requests. Once exhausted, all remaining member fees will be required at the full amount, without exception. If seeking to apply for financial assistance, registration is required in person, in which a photo ID and current W2 copy for you and your spouse is required or current certificate noting qualification for reduced lunch.

As our goal is to allow multiple families in need the ability to receive financial funding, **all remaining member fees will be required at the time of registration in order for member enrollment to be confirmed.** If funding is not submitted, financial assistance will not be held and registration will not be complete.

Financial Aid Policy:

We request that both parents and player make a strong commitment to our program by attending practices and games on a regular basis. **Excessive missing of practices and/or games without reasonable cause may result in full forfeiture of all financial assistance provided in which immediate payment of the funded registration fee will be required for ongoing participation in the program.**

Please complete the following questions:

- 1) What is the annual income of all adults supporting this child? _____
- 2) Did you receive financial assistance or scholarship last year? _____ Yes _____ No
- 3) How many children in your household enrolling in the program? _____
- 4) Are you willing to volunteer 3 - 5 hours throughout the season? _____ Yes _____ No

(Player's Name - Print)

(Player's Grade)

(Male/Female)

(Parent's Name - Print)

(Phone Number)

(Parent Signature)

_____ Yes _____ No
(Appropriate Forms Provided)

(Committee Member Signoff)

(Amt. of Financial Aid Granted)