



## Auburn Thunder Financial Assistance

Players Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City/State Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ (required for club announcements)

Numbers of years played at Auburn Thunder: \_\_\_\_\_

Last Team Affiliation (if applicable): \_\_\_\_\_

Household gross income: \_\_\_\_\_

Number of people in household: \_\_\_\_\_

Did you apply for financial assistance last year? YES NO (circle one)

Did you receive financial assistance last year? YES NO (circle one)

How many players do you have playing Auburn Thunder soccer this season? \_\_\_\_\_

List the programs they are in: \_\_\_\_\_

To my knowledge, all information included in this application is complete and accurate:

\_\_\_\_\_

\_\_\_\_\_

Signature of parent or legal guardian

Date

\*NOTE: Auburn Thunder needs to have a **proof of income** to be able to award financial assistance.

Previous year's **TAX FORM** is required as proof of income.

Please let us know if there are any other issues that have caused your finances to change from your Tax form.