



Application for Assistance

The CSC will take into account all information provided by the applicant and any additional information requested by the CSC. The final determination will be made by the CSC's Board on a case-by-case basis. The Board will consider all factors before making any decisions.

Date of Application _____

Applicant's Name (Parent or Guardian) _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Child's Name _____

Child's Date of Birth _____

Purpose of Application (one sentence about specific need): For example: "Fees for Little League," "Equipment for ice hockey" _____

Dollar Amount requested _____

Sports Program applying for (Write N/A if not applicable)

Beginning and ending dates of sports club/program you are applying for

Fees needed (is this difference from dollar amount requested above?)

Contact Person/Title of Program _____

Address of Program _____

Phone Number of Program _____

Equipment Needed (Write N/A if not applicable) _____

Name and Location of store where you can pick up equipment _____

I hereby verify that all information is correct.

Signature of Applicant _____

Date _____

Please attach a signed and dated Letter of Recommendation on letterhead confirming the need for financial aid at this time. (For example: Clergy, Teacher, Social Worker, Attorney etc)

Note: While the CSC does not base its disbursements solely on income, the Board reserves the right to request pertinent documentation, including but not limited to, tax returns, bank statements, death certificate, letter verifying employment status, letter of foreclosure, divorce settlements.

The Children's Sports Connection is a not-for-profit organization that does not discriminate on the basis of age, political affiliation, race, color, national origin, ethnicity, gender, disability, religious beliefs, marital status or sexual orientation.