



# Fauquier County Soccer Club

## United Financial Aid Application

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Please supply the requested information, attach a copy of your previous year's Federal Tax Return, read and sign the acknowledgement statement, and mail the completed form to: Fauquier County Soccer Club, ATTN: Dan Hayes United Financial Aid Application, P.O. Box 3351, Warrenton, Virginia 20188.

The United Financial Aid Application and Federal Tax Return will be secured at all times and the information will remain strictly confidential.

### REQUESTOR INFORMATION

Requestor's Name:	
Street Address:	
City, State, ZIP:	
Phone:	
Email:	
Size of Household:	
Player's Name:	
Player's Team:	

### GROSS INCOME GUIDELINE

Size of Household	Income Limit	
	Monthly	Annual
1	\$2,500	\$30,000
2	\$3,000	\$36,000
3	\$4,167	\$50,000
4	\$5,250	\$63,000

Size of Household	Income Limit	
	Monthly	Annual
5	\$6,250	\$75,000
6	\$7,083	\$85,000
7	\$7,750	\$93,000
8	\$8,333	\$100,000

### EXTENUATING CIRCUMSTANCES

In the event your household does not qualify for financial aid based on the gross income guidelines, above, you may still be eligible for assistance based on extenuating circumstances. Please offer a brief explanation as to your circumstances and submit along with the balance of this application.

### ACKNOWLEDGEMENT

I certify that the information I have provided and attached is complete and true. Our family agrees to provide at least five hours of volunteer time for club activities, per season, as consideration for any financial assistance which may be provided.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date