

MYS Financial Aid Policy For ECNL Players

This policy applies to MYS ECNL players. There are separate financial aid policies for MYS Recreation and other Travel players.

Subject to the availability of funds, MYS shall offer financial aid for ECNL program fees to those members that demonstrate financial hardship or otherwise merit a reduction in fees. The Board or Treasurer shall determine the amount of the financial aid available for a season; however, there is no obligation to award all/any of the award pool. The decision to make any award, the amount thereof, and the beneficiaries shall be made at the sole discretion of the MYS ECNL Financial Aid Committee and the Executive Director. All application and aid information will be kept confidential within the Financial Aid Committee and MYS staff members responsible for member accounts.

Applications – Completed applications may be mailed to MYS, Attn: ECNL Financial Aid, Box 724, McLean, VA 22101 or emailed to financialaid@mcleansoccer.org. Incomplete applications may result in disqualification. Application deadlines and award decisions shall be communicated by the Program Managers. A player must be registered in the MYS registration system and a registration fee deposit of \$150 must be made in advance of the application being considered.

Eligibility – Any registered team member is eligible to apply for financial aid. Qualification is based on verified family income, factors such as unemployment or other financial hardship. Player merit may also be considered by the Financial Aid Committee. Families of applicants receiving MYS aid awards may be requested to provide up to eight hours volunteer service to MYS each season. Those applicants that do not fulfill this requirement upon request may be ineligible for future aid awards.

Application Process - Applications for financial aid are available online and must be completed and returned to MYS by the announced deadlines. *A signed copy of the most recent Federal tax return on Form 1040 (or applicable form) for both parents of the applicant (supporting schedules and attachments are not required unless requested) must be filed with the financial aid application.* Applicants must register the player on a timely basis in the MYS registration system. *A minimum payment of \$150 must be made towards MYS registration fees before an aid application will be processed.*

Applications will be evaluated by the Financial Aid Committee. The Committee shall present the proposed aid awards to the Executive Director and Finance Director for approval. Notification of aid awards shall be sent via email to each applicant.

Other Opportunities – MYS has a limited number of compensated positions (e.g., referees, field set up, training assistants, Age Group Coordinators, etc.) and volunteer positions (e.g., Rec coaches, TSL's, tournament volunteers, etc.) which offer individuals an opportunity to cover registration costs or to give back to MYS. Please contact the MYS Administrator at admin@mcleansoccer.org for more information on these positions.

**McLean Youth Soccer Association
ECNL Player Financial Aid Application**

Player's name: _____ Player age group/team: _____

Parents' names: _____

Home address: _____

Email address: _____

Estimated gross family income for current year: \$ _____

Adjusted Gross Income from most recent tax return (Form 1040, line 37): \$ _____

Attach a signed copy of both parents' most recent Federal tax Form 1040 or similar form, supporting schedules not required unless otherwise requested.

Employer/position/years of service for:

Father _____

Mother _____

Please list any other information you wish to be considered in evaluating this application (e.g., recent changes in family income levels, employment status, or other financial hardship):

I have read the MYS Financial Aid Policy and understand that MYS registration fees must be paid in full on a timely basis for my child to be eligible to play for an MYS team. I confirm that the information provided herein is true and correct. I understand the MYS Financial Aid Committee may request additional information in consideration of this application.

Agreed to by parent (sign): _____

Name (print): _____ Date: _____