Bayou Soccer Club



Financial Assistance Application 2023-2024

Dear Parents and Players,

BSC is committed to ensuring that all potential players can receive the benefits of participation in our programs regardless of race, economic status and/or physical limitations. As part of that commitment, we are pleased to offer a Financial Assistance program to help families offset fees associated with Competitive, Academy and Recreational programs. Specifically, financial support is meant to cover Club Fees; all families are asked to cover uniform fees and competitive and academy players are asked to cover team Fees (vary by team and may cover both tournament application fees & coach travel costs to away tournaments) on their own.

Funding levels for the program are set anew each year, through donations and fund-raising efforts, and as such are limited. Therefore, submission of an application does not guarantee that assistance will be provided; the number of players receiving assistance and the percentage of fees covered will vary each year depending on funds available. It is recommended that applicants submit their information as early as possible in the application window, to have the best chance at consideration.

Eligibility for financial assistance is based primarily on verified family income; and, so all families applying for assistance must submit income information for verification purposes. Factors such as unemployment, financial hardship, etc will be considered in all cases and must be outlined in detail on the application.

Please note that the Financial Assistance award will be a dollar amount, and the amount families must cover will be stated with the award letter.

To be considered for financial assistance, applicants must supply all the information requested on the following pages, even if certain information has been provided in the past. *Incomplete applications will not be considered*. Again, applications are processed in the order they are received but will not be started until all information is received. The earlier in the cycle, the more likely funds will still be available for award.

Regular attendance and effort at practices and games are required to continue to receive financial assistance after initially awarded.

Application Process

Step 1: Application submission

Submit completed application and all required documentation to HTSA. Applications must be complete before they will be considered/evaluated.

Mail to: BSC

Attn: Financial Aid Committee

PO Box 625

Houma, LA 70361

OR email to: HTSAfinancialaid@gmail.com

Step 2: Review & Award Process

- The Financial Assistance Committee will review completed applications (all support materials must be received for an application to be complete) in the order in which they were received.
- When questions arise, BSC may reach out to applicants for additional information.

2023-24 Financial Assistance Application Form

Player Name	Date of Birth		Gender(M/F)	
Current Team	_ Coach		Age Group	
School			_ Grade	
Parent/Guardian Name				
Address				
(H) Phone (C)	Phone	Email		
List additional members of househol	d including siblings:			
Household Member	Relationship to Player		HTSA Soccer Player (y/n)	

Please note any special circumstances that should be considered (attach additional sheets if necessary):

2023-24 Income Verification Form

Occupation(s) of Parent/Guardian #1:					
Occupation(s) of Parent/Guardian #2:					
Do you own or rent your home? Number of wage earners in household?					
2022 gross household income (before taxes)					
2021 gross household income (before taxes)					
Has the player received BSC financial assistance previously?					
If yes, when and for how much?					
Number of years family has been with HTSA?					
For children attending private school, do you receive tuition assistance?					
If yes, from where, and for how much?					
Please indicate the amount of financial aid you are requesting?					
Please include a copy of one of the following forms along with your application: 2022 U.S. Federal Tax Return (Form 1040) or, if not yet filed, 2022 Federal Tax return and 2020 extension request 2022 W-2 or 1099 Misc forms for both parents/guardians Proof of eligibility for Medicaid, Free Lunch Program or Food Stamps (if applicable)					
I certify that the information on this application form, including the verification form, is accurate, complete, and up to date, to the best of my knowledge. I understand that providing incorrect or false information may result in the player forfeiting, repaying and paying fees, including legal fees and back interest.					
Signature of Parent/Guardian: Date:					
Printed Name:					

Financial Assistance Notification Form

Please fill out this form and submit it along with the financial assistance application form and income verification form. Upon review of your application, this form will be returned to you with the decision of the Financial Assistance Committee.

Player Name			Date of Birth	Gender(M/F)	
Current Team Coach				Age Group	
School			Grade		
Mother's Name/Guardian Na	me				
(H) Phone	(C) Phone		Email		
Father's Name/Guardian Nan	ne				
(H) Phone	(C) Phone		Email		
Address where notification sh	nould be emailed:				
			_		
			_		
	FOR BSC	OFFICI <i>A</i>	AL USE ONLY		
APPROVED: Financial A	Assistance figure a	nd expl	anations follows:		
Financial Assistance a					
Family/player respon	sibility	\$			
NOT APPROVED					
Reason:					
Decision Date:					
Approved by:			Date:		
President Signature:			Date:		