



COMPLETE THIS FORM AND SUBMIT IT TO KIDS FOR SPORTS FOUNDATION, 403 PARADISE PKWY, MESQUITE, NV 89027. FOR MORE INFORMATION CALL: KATHY BUSSMAN AT 702-345-6710

Kids for Sports ensures all kids are given the opportunity to experience the positive benefits of playing organized sports. We do this by helping remove financial and other barriers that prevent kids from participating in sports.

~This application is only for families with children that would not otherwise be able to play a sport~

Application for Financial Assistance

Eligibility

To be eligible for assistance, a child must meet each of the criteria listed below:

- Live in Virgin Valley Area (Mesquite, Beaver Dam, Bunkerville & Scenic)
- Be enrolled in school (Pre-K through 12th grade)
- Commit to attend a minimum of 80% of scheduled practices and games
- Not be currently enrolled in an existing fee waiver program

Requester First Name: _____ Parent Name: _____

Requester Last Name: _____ Coach Name: _____

Street Address: _____ City, State, and Zip: _____

Daytime Phone: _____ Evening or Cell Phone: _____

E-Mail Address: _____

Age: _____ Gender: _____ Date of Birth: _____ School: _____ Grade: _____

• Which sport is your child requesting to play? _____ Which season & team? _____

• Which type of assistance are you requesting? Please select choice:

For FC Mesquite Applicants:

- Has child played club soccer before? **Yes / No**

Registration Fee Waiver Equipment/Uniform Voucher Travel Other: _____

• Dollar amount requested \$ _____ What is your deadline for assistance? _____

• Are parents/guardian currently employed: **Yes / No.** Are you a 1 or 2 income household: _____

• PARENTS - please explain why you are requesting financial assistance in detail: _____

• CHILD/ATHLETE - please explain why you want to play this sport (In child's own hand writing please): _____

CONSENT TO EXCHANGE INFORMATION: I understand that information may be needed to verify eligibility for this program and to coordinate services with other agencies; therefore, I agree that agencies may share my child's information. I certify that the information supplied is true and correct and that Kids for Sports Foundation staff have my permission to verify the information on this application. Kids for Sports Foundation reserves the rights to determine and prioritize needs. I understand that my child's participation in this program requires a commitment to attend a minimum of 80% of the scheduled practices and games. I also understand my child's picture may be taken for publicity purposes.

Signature of Applicant: _____ Date: _____

* Grant requests for camps will be considered for a target of 75%.

* Late registration fees will not be awarded on grants.

* Grant applications will not be accepted for reimbursements.