

East Meadow Soccer Club

Application for Financial Aid

Must be filled in completely

Player's Name _____

Team _____

Age Group _____

Parent information

Cell Phone number _____

Email address _____

Father's name _____

Employer _____

Work phone _____

Annual Salary \$ _____

Mother's name _____

Employer _____

Work phone _____

Annual Salary \$ _____

Number of Dependents _____

Amount of Financial Aid applying for \$ _____

Amount you can contribute towards players' expenses \$ _____

