

SAND SPRINGS YOUTH FOOTBALL ASSOCIATION

3963 S. Highway 97 #156 / Sand Springs, OK 74063

(918) 248-1042

FINANCIAL ASSISTANCE APPLICATION

The SSYFA seeks to assist people who have financial limitations. The amount of assistance awarded to any one individual/family may be limited in order to serve the greatest number of applicants within the resources available. All information obtained in the financial assistance application will remain confidential and be accessible only to members of the Financial Assistance Committee.

You **MUST** submit a copy of the front page of your Federal Income Tax return (1040, 1040A, 1040EZ) to be considered.

Application for (child's name):	Grade in Fall:
<input type="checkbox"/> Football <input type="checkbox"/> Cheerleading	Date:

Names of Household Members	Gross Monthly Earnings	Monthly Welfare, Child Support, Alimony, Unemployment, Workers Comp	Monthly Payments from Pension, Retirement, Social Security	Any Other Income (Including Military / Military Housing)

What amount do you feel you could pay at registration? _____

I certify that all the above information is true and correct and that all income is reported. I understand that this application is based on approval by the SSYFA Board of Directors and that any false information will result in the dismissal of my child from the SSYFA program.

Printed Name of Adult Household Member	Signature	Date
Address	City / State	Zip
Home Phone	Work Phone	Cell Phone