

## **NEWBERG YOUTH SOCCER**

## **Scholarship Policy**

Newberg Youth Soccer (NYS) believes all children should be able to play soccer, regardless of their family's financial situation. Families in need are offered the opportunity to play through our need-based scholarship program. If you know the posted club fees will be a hardship on your family, please apply for financial aid. All applications will be considered and reviewed in strict confidence by the club's Scholarship Committee, made up of NYS President, Treasurer, and Registrar. No full scholarships will be awarded. Recipients will be awarded partial amounts and will agree to pay the remainder of the fees.

In addition, financial aid recipients will be expected to volunteer 10 hours to NYS in one or more areas – Winter Academy, stadium clean up, concessions, field preparation, etc. Please note that if volunteer hours are not fulfilled, you will be responsible to pay back the scholarship monies in full.

If you apply and receive scholarship monies, you are entering into a legal contract with NYS. The club will not issue a player card until your contract is signed and returned. If you are approved for aid, you will need to pay your balance off monthly. Missing two payments may result in your player card being revoked until you pay. If you are unable to pay, it is your responsibility to contact the Board (<a href="mailto:treasurer@newbergyouthsoccer.com">treasurer@newbergyouthsoccer.com</a>) immediately and explain your circumstances.

If you decide to leave NYS during the year, you will forfeit your scholarship and be expected to pay the full posted club fee. NYS will not release your player card to any other club until you pay off the entire fee plus any amount owed for team fees.

Financial Aid application requirements:

- 1. Complete the scholarship application
- 2. Write a statement of intent for playing club soccer
- 3. Include the financial documentation requested
- 4. In a sealed envelope, send these three items to Newberg Youth Soccer, Attn: Scholarship Committee, PO Box 1074, Newberg, OR 97132.

Thank you and we look forward to working with you.



## **NEWBERG YOUTH SOCCER**

## **Scholarship Application**

Player Name	
Mailing Address	
City	State Zip
Primary contact phone number	Email address:
Parent/Guardian 1 name	Parent/Guardian 1 occupation
Parent/Guardian 2 name	Parent/Guardian 2 occupation
Annual household income	Number of children (under18) living in home:
Please describe the circumstances that ha	ve made paying club player fees a hardship for you family:
Can you make a monthly payment?	How much can you pay monthly?
What is the <u>total</u> amount you can afford to pa	ay?
Please read and check the following statemer	nts in the agreement:
☐ I have been truthful regarding my	amily's finances.
-	commit at least 10 hours of volunteer service for the benefit of the club.
☐ I will make payments as designated	d in my official financial aid contract.
<ul> <li>I understand I will be responsible f completed. In this event, the club wil</li> </ul>	or the full posted club fees if I decide to leave the club before the year is I revoke the scholarship.

<ul> <li>I am aware that any awarded amount goes toward club fees only. There will be additional expenses (uniforn team and tournament fees, travel costs) for which I am fully responsible.</li> </ul>
Your application for financial aid must include the following documentation:
$\ \square$ School district verification of eligibility for the free or reduced lunch program $\underline{\textbf{OR}}$
$\underline{\ }$ A copy of the first two pages of the family's most recent completed tax return
☐ A short statement of intent (typed or handwritten) by the prospective player explaining why playing soccer for NYS is important to her/him.

Please submit this application and supporting documents to Newberg Youth Soccer, PO Box 1074, Newberg, OR, 97132. If you have any questions, please direct them to the Board Treasurer at treasurer@newbergyouthsoccer.com.