**FORT SMITH JUNIORS**

**REDUCED FEE PROGRAM**

**APPLICATION**

PLAYER’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_\_\_\_\_

AGE GROUP PLAYER WILL PARTICIPATE IN \_\_\_\_\_\_\_.

PARENT NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE & ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

GROSS INCOME AS STATED ON MOST RECENT INCOME TAX RETURN:

$\_\_\_\_\_\_\_\_\_\_\_.00, (***a copy of income tax return must accompany this application***)

NUMBER OF FAMILY MEMBERS LIVING IN HOME: \_\_\_\_\_\_\_

NUMBER OF DEPENDENTS LIVING IN HOME: \_\_\_\_\_\_

By submitting this application I acknowledge that I have read, understand and accept the

program guidelines as set forth by the Fort Smith Juniors Volleyball Club (FSJ). I understand, I

will be responsible for paying the portion of the player’s fees which are not covered by this

program. I agree to allow FSJ to keep this application and all support documents on file as may

be required by regulations governing such programs. I understand these records will remain confidential and I agree that the FSJ Program Committee has the sole discretion, based on the applications received, to award the program funds on a need basis, which is limited to the available funds and number of applicants as set forth each year by the FSJ Board of Directors.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For FSJ Use: Applicant approved for program:

Date Received:

Approved: \_\_\_\_\_ Percentage awarded: \_\_\_\_\_\_

Declined: \_\_\_\_\_ Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application forms: email to treasurerfortsmithjuniors@gmail.com, mail to FSJ P O Box 10496 Fort Smith, AR 72917 or be dropped off at the building and placed in the purple box