



## **Financial Assistance 2024/25 Competitive Season**

Need-based financial assistance is available to all Tampa Dynamo FC youth players and their families to provide financial assistance with the **Club Registration fee(s)** for the seasonal year.

Financial assistance award can only be applied to Tampa Dynamo FC **Club Registration Fees**. No team fees, trainer fees, uniforms, travel fees, etc. will be covered. If you are chosen for a competitive team these obligations will be your responsibility regardless of any financial assistance that may be provided for registration fees.

Full or partial assistance may be awarded. Financial assistance awarded is a one (1) time event and no future guarantee or consideration is implied or should be expected. Players and their families may apply for financial assistance every year.

The number of families awarded financial assistance will depend on the funds available to the Financial Assistance Committee as determined by the annual budget of the Tampa Dynamo FC Competitive Program. Tampa Dynamo FC reserves the right to not award financial assistance if the league's financial status prevents it.

*The information provided in the application must be true, complete, and factual to the best of one's ability and knowledge. Inaccurate information will result in disqualification for one (1) calendar year.*

### **APPLICATION & AWARD PROCESS:**

To apply for financial assistance:

Read all instructions and fully complete the application below. *NOTE: Incomplete applications will not be considered.*

- 1) Form 1040 for the past two tax years
- 2) Last two Paystubs for all adult wage earners in the household
- 3) A copy of the free or reduced lunch letter from the players school district (if applicable)

Please do your best to provide all the above, the club will be able to apply for a foundation grant from FYSA our governing body, only if all three pieces of information are submitted. This may affect the amount of finances we are able to budget for in our scholarship program.

Once received, the Tampa Dynamo FC Financial Assistance Committee will review your application and determine if financial assistance will be awarded. You will receive a reply from the committee regardless of the outcome of their decision. You will be required to volunteer more time than the required hours for every player at Tampa Dynamo FC. The number of hours in excess of the required ten will be determined by the amount of financial assistance awarded.

### **SUBMITTING A FINANCIAL ASSISTANCE APPLICATION:**

Please scan and email all documentation to [clubadmin@tampadynamofc.com](mailto:clubadmin@tampadynamofc.com) as we will not be at the complex over the summer period. Please email [chrisfarnworth@tampadynamofc.com](mailto:chrisfarnworth@tampadynamofc.com) if you need to set up an in-person meeting to hand over the documents.

### **2024/25 DEADLINES AND AWARD DATES:**

Competitive Players: Financial assistance applications must be received by July 3rd, 2025, and a decision will be reached by July 24th, 2025. Prior to the club's first installment on August 1<sup>st</sup>. Upon acceptance expect an email from Club Director Chris Farnworth to discuss the individual finances and an individual payment plan to pay the Club fees over the course of the 10-month season.

Please note that all information provided and/or discussed will be kept confidential but will not be returned.



## Financial Assistance Application

Please read all instructions carefully and submit the fully completed application as described above. (If more than one player in the family list other player information on a separate sheet. Please include Name DOB and Coach or team.

**Player Name:**

**Birth Date (MM/DD/YYYY):**

**(PLEASE CIRCLE ONE)**      Seniors (U15-U19)      Juniors (U11-U14)      Academy (U7-U10)

**Age Group:**

**Team/Coach:**

**Parent(s) name(s):**

**Address (including city, state & zip code):**

**Mobile Phone Number (including area code):**

**E-Mail Address:**

**Total number living in the household applying:**

**Household Income anticipated for current calendar year: \$**

**Prior calendar year: \$**

**Second Prior calendar year: \$**

**Current mortgage/rent payment: \$**

- Check if you receive any type of public assistance (food stamps, rental assistance (Section 8)). *We do not need to know the amount.*

Please read and initial each of the following statements:



( \_\_\_\_\_ ) I understand that by requesting financial assistance consideration from Tampa Dynamo FC the information provided and/or discussed will be kept confidential by the Financial Assistance Committee.

( \_\_\_\_\_ ) I understand that any award is a one (1) time event, and no future guarantee or consideration is implied or should be expected.

( \_\_\_\_\_ ) I understand that the financial assistance award can only be applied to Tampa Dynamo FC registration fees. No team fees, uniforms, travel fees, trainers, tournament fees, etc. will be covered and I am still obligated to pay those fees.

( \_\_\_\_\_ ) I understand and by submitting and initialing this form hereby certify that the information I provide for consideration, either verbal or written, must be true, complete and factual to the very best of my ability and knowledge or I will be disqualified from receiving any assistance and applying for assistance for one calendar year.

( \_\_\_\_\_ ) I understand that playing soccer at Tampa Dynamo FC is a privilege, not a right and that the decisions of the Tampa Dynamo FC Financial Assistance Committee are final and may not be challenged or appealed in any way.

( \_\_\_\_\_ ) I understand that this award requires 10 volunteer hours. If hours are not completed, or if shifts are missed, Tampa Dynamo FC reserves the right to pull the pass of the player until hours are completed, at the discretion of the Financial Assistance committee and/or the financial assistance award may be rescinded and will be added to the current balance on account.

( \_\_\_\_\_ ) I understand that this award requires my continued participation with the Club for the current seasonal year. If we quit or leave the Club for any reason other than military or job-related deployment or move, the financial assistance award may be rescinded and will be added to the current balance on my account.

The following information must be submitted with this application:

- 1) *Form 1040 for the past two tax years*
- 2) *Last two Paystubs for all adult wage earners in the household*
- 3) *A copy of the free or reduced lunch letter from the players school district (if applicable)*

Give a summary of reasons for consideration. Include all relevant information to the request (attach additional pages if necessary):

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Signature of person applying (must be at least 18 Years of age):

Date:

Date Application Received: \_\_\_\_\_ Amount Approved: \$ \_\_\_\_\_ Date Approved: \_\_\_\_\_

Financial Assistance Committee Members: