



North Metro Soccer Association
PO Box 99
Andover, MN 55304
northmetrosoccer.org

North Metro Soccer Association is primarily a volunteer organization. We rely on registration fees to fund our program. However, we understand the financial difficulty you are experiencing at this time. We provide proof of participation in free or reduced lunch programs or other documentable extenuating circumstances for fee waivers. Scholarships are made possible by the many community members who have donated to our Club and by fundraisers the club members and players have participated in.

For your child to be considered for a waiver or reduction of the registration fee, the Club requires an adult family member to commit at least 5 hours (per player) of volunteer time to the club. This can be done by coaching a team, helping with field maintenance, helping at the Jamborees, tournaments, picture nights, putting together coach packets, and a number of other opportunities. It is the adult family members' responsibility to fulfill this requirement. Failure to perform the required 5 hours (per player) of volunteer work can result in the full registration fees being due immediately or the player(s) no longer being allowed to participate in practices and games.

_____ I agree to perform 5 hours (per player) of volunteer work at the club. (Initials)

All waivers are to be received by the board before registration ends for consideration. Late requests will not be granted without extenuating circumstances (new to club, new to area).

Requesting: Full Waiver _____ Payment plan* _____ Fee Reduction _____ *If requesting a payment plan or if you qualify for free or reduced lunch, you do not need to fill out income information.

Childs Name: _____ Birthdate: _____

Childs Name: _____ Birthdate: _____

Phone number(s): _____

Address: _____ City: _____

Fathers Name: _____ Occupation: _____

Mothers Name: _____ Occupation: _____

Total Living in Household: _____ Family income for last 12 months: _____

Proof of income may be requested

Check all that apply: Free/Reduced Lunch (please provide copy) _____

Single Income _____ Double Income _____ Single Parent _____ Shared Custody _____

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All information submitted will remain confidential and will only be used to determine eligibility.

How do you plan to volunteer? (coaching/field maintenance/equipment maintenance/ Jamboree/Tournament/ Need at home job): _____

Other information that would be helpful to the board in making their decision:

Signature of Parent/Guardian: _____

IF YOU WERE GRANTED A SCHOLARSHIP LAST YEAR, PLEASE WRITE A BRIEF STATEMENT STATING HOW YOU DONATED YOUR HOURS LAST SEASON.

-----DO NOT WRITE BELOW LINE-----

BOARD DECISION

Club President Signature: _____ Date: _____

Date received by board _____

NMSA, PO Box 99, Andover, MN 55304 admin@northmetrosoccer.org 763-260-4121