



Trevian Soccer Club/FC United Application for Financial Assistance

Instructions

1. Please complete the Application for Financial Assistance and send it, including the financial information requested, directly to:

Family Service of Glencoe
Attn: Mimi Hart
675 Village Court
Glencoe, IL 60022

2. The contents of your application and attachments will be reviewed solely by Family Service of Glencoe and will be kept confidential and not revealed to any member of Trevian Soccer Club/FC United.
3. Family Service of Glencoe may or may not recommend financial assistance. **ALL FAMILIES ARE EXPECTED TO PAY A PORTION OF THE CLUB FEES.** No full scholarships will be given.
4. Partial scholarships will be applied toward the registration fees only and excludes the cost of the uniform.
5. The decision of Family Service of Glencoe will be final.
6. Once Family Service of Glencoe has communicated its decision to you and us, you must immediately remit to the club the portion of fees for which you are not given financial assistance.

If you have questions, please call or e-mail the Trevian/FC United office:

Phone: 847-386-6579

E-mail: trevianfcunited@gmail.com

Trevian Soccer Club/FC United
Application for Financial Assistance

Name (Head of Household): _____

Address: _____

City: _____ Zip: _____

Home phone: _____ Business phone: _____

Names(s) and age(s) of players: _____

Total number of children in family: _____

Please briefly describe the reasons for application for financial assistance:

Please submit one or more of the following pieces of documentation:

1. Most recent IL 1040 forms from all working parents or guardians living in your household.
2. Most recent check stubs from all working parents or guardians living in your household.
3. Describe and/or provide proof (bills, etc.) of unusual family expenses this year.

Signature: _____ Date: _____

Office use only

Recommended percentage fee reduction for this family is _____%.

Name (head of household) _____

Address: _____

City: _____ Zip: _____

Phone: _____ Applicant notified: _____

Representative of GFS: _____ Date: _____