



Soccer for the City Minneapolis United

FINANCIAL AID APPLICATION

Player requesting financial aid:		Birth date:
Describe need for the financial aid:		
Financial aid requested: \$		
Other information		
Mother:		Address:
email:	Phone:	City & Zip:
Father:		Address:
email:	Phone:	City & Zip:
Number of persons in the household:	Children:	Adults:
What was your adjusted gross income for the last year you filled income taxes; or net household income for families not filing a tax return?		<input type="checkbox"/> Less than \$15,000 <input type="checkbox"/> \$15,000 - \$25,000 <input type="checkbox"/> \$26,000 - \$35,000 <input type="checkbox"/> \$36,000 - \$45,000 <input type="checkbox"/> greater than \$45,000
If the parents live apart and filed tax forms separately, what is the combined adjusted and/or net income?		\$
Children's schools :		
If private school, do you receive financial assistance?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please indicate amount.		\$
Required Parent Signature:		Date:

Please pay what you can; make check out to: **Minneapolis United**
 and return completed form with check and completed registration to
 MU Administrator
 5537 Knox Ave. S
 Minneapolis, MN 55419