Barracuda Volleyball Club Financial Assistance Program

Thanks to our Sponsors, Barracuda Volleyball can help with registration fees for youth, who without financial assistance, would be unable to participate in Barracuda Volleyball programs. Barracuda Volleyball is a 501(c)(3) non-profit organization with limited funding available for assistance. No guarantee of assistance is implied by this application. Regardless of the scholarship amount, parents will still have to pay some amount as no one receives 100% full scholarship. *Barracuda Volleyball does not discriminate on the basis of race, color, national origin, sex or disability in its program and activities.*

Eligibility

1. Applicants must be enrolled in school (kindergarten through 12th grade).

2. Parent/Guardian and participant commit that the athlete will attend a minimum of 90% of all scheduled practices and games. Anything less can result in separation from the team.

3. Application must be completed by Parent or Guardian.

Qualifications

Financial assistance will be considered for eligible players meeting one or more of the criteria below:

 Receive assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC and can provide written documentation of participation in these programs.
Provide recommendation by school representative, social worker, youth community center workers or other social service representative.

3. Provide a written statement of immediate financial hardship explaining the current situation. Barracuda VB recognizes that a family may not be receiving formal assistance from the programs mentioned above, yet financial assistance may still be needed to participate in a Barracuda program. In these instances, the Club will consider the financial hardship statement to determine assistance eligibility. Please provide any supporting documentation that may support the facts in your financial hardship statement.

Procedure

- 1. Applications will be completed by Parent/Guardian.
- 2. Current Letter of Commitment must be signed by all required parties.
- 3. Application and supporting documents will be turned into Club Directors for review.

4. The amount of assistance awarded (if any) will be partial depending on the situation, number of applicants and the amount funds available.

5. Parent/Guardian will be notified as to the amount (if any) of the award.

Players Name:	
Address:	
City/State/Zip:	
Date of Birth:	Current Grade Level:
Parent/Guardian Name:	Mail:
Cell Phone: E-N	Mail:
	g information with your financial assistance form.
COMMENTS/STATEMENTS:	