

**Greater Renton Tukwila Youth Soccer Association (GRTYSA) Application  
for Financial Assistance**

**Return to: GRTYSA, 6947 Coal Creek Parkway SE, #349 Newcastle, WA 98059**

**Season**

\_\_\_ Fall

\_\_\_ Spring

**Program Description:** Greater Renton Tukwila Youth Soccer Association (GRTYSA) is a non-profit youth soccer organization that offers a Financial Assistance program for youth participants who are in need of financial aid in order to play soccer in GRTYSA. Each request for aid is considered on a per season basis and applies to registration fees only. Participants are required to purchase their own required shin guards and cleats. The amount of aid and number of family members/players receiving aid is dependent upon available funding and is not guaranteed from year to year.

**Confidentiality:** All gathered information is for the express and sole purpose of assisting the GRTYSA Board in making financial assistance decisions. Scholarship requests are strictly confidential. Incomplete forms will not be considered.

**Application for Financial Assistance**

**Parent/Guardian Information**

Parent/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_  
Employer: \_\_\_\_\_ Employer Phone: (\_\_\_\_) \_\_\_\_\_  
Household Size: Number of Adults \_\_\_\_\_ Number of Children (Under 18) \_\_\_\_\_

**Participant Information**

1) Participant Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Current School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Special Needs: \_\_\_\_\_  
Age Group: U- \_\_\_\_\_

2) Participant Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Current School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Special Needs: \_\_\_\_\_  
Age Group: U- \_\_\_\_\_

Have any of the participant(s) above ever received financial assistance from the GRTYSA, TUSK or SCORE? Yes [ ] No [ ]

If yes, please list season(s): \_\_\_\_\_

Reason for Requesting Aid:


**Financial Aid Requested:**

Total Cost of Registration Fees \$ \_\_\_\_\_

Amount You Can Pay \$ \_\_\_\_\_

Total Financial Aid Requested \$ \_\_\_\_\_

I'm willing to volunteer? Yes [ ] No [ ]

If so, in what way can you help the association:


**Financial Aid Requested:**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*I certify that to the best of my knowledge that the above information is true and accurate.*

**For GRTYSA Use ONLY**

Request Approved: Yes [ ] No [ ]

Amount Requested \$ \_\_\_\_\_ Amount Approved \$ \_\_\_\_\_

Required Family Contribution \$ \_\_\_\_\_

Notes:

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