



Cedar Stars Soccer Academy
Financial Aid Application – _____ Division
2017/2018 Season
3 Empire Blvd. – South Hackensack, NJ 07606

Instructions for completing the Financial Aid application for CSA:

A. Documents Needed:

1. The deposit is required before the application can be approved. This can be done by checking the acceptance email that was sent to your email from Blue Sombrero. **The deposit is not refundable!**
2. Complete all requested information on the application for financial aid.
3. Attach a copy of your 2016 income tax returns/proof of income
4. Copy of a valid photo ID
5. Copy of a utility bill matching the address on the government ID

B. Signature & Mailing:

1. Sign and date the form. Please make sure all the above documents are included. **No application will be reviewed unless we have all four documents submitted. NO EXCEPTIONS!**
2. Send or drop off the application for Financial Aid to Cedar Stars Academy at:
Cedar Stars Academy, 3 Empire Blvd., South Hackensack, NJ 07606

Application for Financial Aid

It is the intent of CSA to allow as many children as possible the opportunity to play soccer. Each year the Academy sets aside funds to provide a limited amount of financial aid to players. In order to fairly disburse the financial aid, the information on this form must be completed. You will be notified of the status of your application upon review. If you need help completing this form please contact a CSA staff member.

Name of Player (s) (if you have more than one (1) child in CSA:

1. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
2. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
3. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
4. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____



#

Name of Parents or Legal Guardian:

Father: First Last

Mother: First Last

Street Address: City, State Zip Code Home Phone Cell Phone

Email Best Phone Number to Be Reached At**The following questions will be used solely to determine need for financial aid:**

How many children or total dependents do you support in your household? _____

Scholarship is for the year of: _____

Please check one of the following ranges for yearly household income:

☐ Less than \$20,000☐ \$21,000 to \$50,000☐ \$51,000 to \$100,000☐ \$100,000 +



Please describe your need for financial aid below:

- ☐ Full Financial Aid
- ☐ Partial Financial Aid

Amount Requested \$_____

Cedar Stars Academy cannot guarantee financial aid for all applicants

By signing, I attest that the information provided on this form is accurate:

Signature of Parent or Guardian

Date