



Athlete's Name _____

Financial Assistance Application

Print Athlete's Name _____

Date _____

Iowa Intensity Youth Sports hopes to provide opportunity regardless of the ability to be able to afford the fees for the program.

Please complete the following information about the Parent(s)/Guardian(s) income and return it to Iowa Intensity Youth Sports as soon as possible. Also, include a copy of any income/benefits received during the most recent full year (such as, W-2, 1099's or other documents). The Board of Directors reserves the right to require documentation of any items listed on this form or income tax returns.

STEP 1: Untaxed income: Cash support includes money, gifts, and loans, plus housing, food, clothing, car payments or expenses, medical and dental care, college costs, and any money paid to someone else on his behalf. For example, if a friend or relative pays his/her electric bill or part of his/her rent, he/she must report the amount as untaxed income.

Please list all items considered **untaxed income**:

_____	_____
_____	_____

STEP 2: Income and Expense Disclosures:

INCOME per month

Wages, salaries, tips \$ _____
Cash \$ _____
Social Security Benefits \$ _____
TANF (Temporary Assistance for Needy Families) \$ _____
Unemployment Benefits \$ _____
Child Support/Alimony \$ _____
Veteran Benefits \$ _____
Financial Aid \$ _____
Other (explain) \$ _____
Total monthly income: \$ _____
X 12 months = \$ _____

EXPENSES per month

Rent or House Payment \$ _____
Utilities \$ _____
Phone (including cell phones) \$ _____
Car Payment \$ _____
Car insurance, Gas, etc. \$ _____
Personal (clothes, soap, etc.) \$ _____
Child Care \$ _____
Other (explain) \$ _____
Total monthly expenses: \$ _____
X 12 months = _____

