



Evanston Junior Wildkits
5318 Greenleaf St.
Skokie, IL 60077

CONFIDENTIAL DUES ADJUSTMENT APPLICATION

Season Year: _____, ending May 31, 20__

Participation in Evanston Junior Wildkits (EJW) is open to all regardless of means.

The membership commitment level is based on the number of youth players in a household, regardless of one's use of the various programs the EJW organization offers. The purpose of an adjustment for the membership commitment is to enable youth hockey players to join or retain membership, when circumstances do not permit paying the standard rate. The EJW Finance Committee will evaluate and make adjustments based on the following:

1. Each request must reflect financial need or special circumstances.
2. Each request, when granted, is subject to re-evaluation each year.

Name _____

Spouse's/Partner's name _____

Home address _____

Home Phone _____

I understand that all of the information contained below may be reviewed in a confidential manner by the Finance Committee of the EJW Board.

Signature _____

Applicant

Spouse/Partner

Date

We are unable to consider your application without the answers to all of the following questions:

Years at your main residence _____ Do you own a secondary residence? _____

Number of children _____ Please list ages of unmarried dependent children _____

Adult #1 Occupation and Title _____

Adult #2 Occupation and Title _____

Total family adjusted gross income for tax year 20__ from all sources (child support if applicable)
\$ _____

Please indicate what you predict your gross income to be for calendar year 20__ \$ _____

Monthly rental / mortgage payment (including assessments if applicable) \$ _____



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Other financial obligations of a significant nature (please specify & indicate amounts)

Do you expect your income for the coming year to be appreciably different? Please explain

Please explain why it is not possible for you to pay dues in the standard amount applicable to your family status: (Please you back if more space is needed)

What amount do you suggest as a recommended guideline for the _____ season: \$ _____

Your Payment Plan (Please note: All balances are due in full 30 days prior to end of regular season)

I/We prefer to pay:

Three Months

Four Months

Six Months

I understand there will be a payment processing fee added to every payment.

Please return this application to:
Treasurer, c/o Evanston Junior Wildkits
5318 Greenleaf St.
Skokie, IL 60077

Or email to jrwildkitsshockey@gmail.com

(Please mark it "Confidential")