



OCEAN STATE SOCCER SCHOOL

P.O. Box 452

North Kingstown, RI 02852

www.oceanstatesoccer.org



One of the many goals of the Ocean State Soccer School (OSSS) is to ensure any child with the desire, commitment, and ability to play soccer be given the opportunity regardless of financial ability. To that end, the Ocean State Soccer School will attempt to assist, within its means, those families who show a financial need for assistance with tuition costs. Not everyone who applies for assistance may be deemed eligible. Assistance will be determined by a majority vote of the OSSS Board of Directors following consideration of individual circumstances. Fulfillment of financial aid requests does not automatically qualify the same family for aid for subsequent seasons.

Those families who have satisfactorily met the requirements to be granted aid will be provided with tuition assistance only in the amount of up to one recreational tuition per family per season of OSSS play. That amount may be applied toward a competitive registration for the same season, but may not be used towards, tournament, uniform, referee, concession, late registration, future, or other fees. The possibility exists for the availability for additional assistance for special circumstances. Appeals for further aid may be made to the OSSS President.

Each family receiving financial assistance from OSSS is responsible to reciprocate through active participation in the OSSS. In doing so each family receiving financial assistance is requested to donate at least ten (10) volunteer hours to OSSS. There are many ways in which a family can assist the OSSS. Some examples include, but are not limited to, field day assistance, coaching, team parent, concession stand assistance, picture day and field day assistance.

In order to be considered for financial assistance, this form must be completed in its entirety. The form must be submitted to OSSS for processing and review by a date no later than **ten days past that season's registration deadline date**. Any application received after this deadline may not be considered. The completed form can be sent to the OSSS Director of Safety, Bill Gallagher at billgallagher11@verizon.net or by mail to OSSS, PO Box 452, North Kingstown, RI 02852.

Financial assistance is based on individual family need based on information supplied by the requesting family. Financial assistance is not talent based. Requests are not automatically approved. The OSSS Board of Directors will review the application and you will be notified of the outcome. For any questions regarding the financial assistance process, please contact Bill Gallagher at billgallagher11@verizon.net.

Pertinent documentation pertaining to the corroboration of the need for aid may be requested for review.

Player Name _____

Mother's/Guardian's Name _____

Employer _____

Father's/Guardian's Name _____

Employer _____

Primary Address _____ City/State/Zip _____

It's For the Kids !!

Primary Email Address _____
Home Phone _____ Work Phone _____ Cell Phone _____

Dependent Children(*children living in the home who are under the age of 18*):

Name _____	Age _____
Name _____	Age _____
Name _____	Age _____

*Annual Household Income _____

Has your family been granted full or partial OSSS tuition in the past? _____

If yes, when and amount? _____

Has your family been granted full or partial tuition for any other non-scholastic sponsored activity? If yes when and for what activity? _____

Has any member of your family volunteered with OSSS in the past year? _____ If yes, when and in what capacity? _____

The space provided is for the use of the applicant to provide any additional comments pertinent to the request being made:

I understand that applying for financial aid does not automatically grant me financial aid. I certify that the above information is correct and true to the best of my knowledge. I understand that by accepting financial assistance for my family to participate with OSSS that my family can be expected to volunteer at least ten (10) hours of time to the OSSS during the course of the season for which assistance is granted.

Signature _____ Date _____