

Lone Peak Youth Football Financial Assistance Program

Lone Peak Youth Football provides partial registration fee assistance to local athletes, who without this financial assistance would not otherwise be able to participate. The LPYF Financial Assistance program focuses on providing opportunities for our area youth to participate in football. Scholarship assistance will be dependent upon the LPYF funds available and the actual need shown. Please be aware that at LPYF our Financial Assistance Funds are limited! Our primary goal is to help as many young athletes participate in LPYF that we possibly can. Rather than offering full scholarships we offer partial scholarships to help out more families in need this season. Awards of assistance are NOT guaranteed to every applicant. Requirements for eligibility:

- Athlete must be in Grade 1-9 and live within the Lone Peak High School boundaries.
- Commitment to attend a minimum of 80% of scheduled practices and games.
- Participation by a family member in at least four (4) volunteer opportunities during the scholarship season: 2 sessions of equipment hand-ins and 2 sessions of equipment hand-outs.
- Application must be completed by a parent, guardian, or head of household, with all requested information provided. (Incomplete applications will not be considered.)
- Priority will be given to eligible youth meeting one or more of the criteria below:
 1. Member of a multi-child family.
 2. Living in a single parent home.
 3. Receiving assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC, etc.(Must provide written documentation of participation in these programs to receive priority status)
 4. Written recommendation by school representatives, social workers, youth community center workers, or other social services representatives.

**Approval process of a registration scholarship does not register the participant for LPYF. You will still need to complete all registration documents as well.

Date of application: _____ Player Name: _____

Cell Number _____ Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

What is the annual household income? \$ _____ Household Size: _____

What is the maximum amount you can pay towards registration fee? _____ Do you receive or qualify for the Free and Reduced-price meals program through the school district? Yes or No (Circle One)

If awarded with a scholarship would you be willing to volunteer in some capacity to PYF?

Yes _____ No _____

Please explain your request/circumstances:

The Financial Committee will review your application and determine if you qualify for an award. The committee will be taking into account whether or not your family qualifies of the Free or Reduced price meal program. Please make sure all information is complete and correct. Any personal information that you are required to provide will be kept confidential within the Board of Directors.

CONSENT TO RELEASE INFORMATION: I understand that my signature authorizes LPYF to obtain verification of all the information on this application and that additional information may be necessary for approval of this application. I certify that all of the information on this form is true and correct. I understand that my child(ren)'s participation in this program requires a commitment to attend a minimum of 80% of the scheduled practices and games and my participation in at least 2 equipment hand-in sessions AND 2 equipment hand-out sessions. I agree to notify LPYF of any change in my income or ability to pay. I am aware that assistance funds are awarded for a maximum of one year, after which time it is my responsibility to reapply.

Parent /Guardian (Print): _____

Parent / Guardian Signature: _____

Employer: _____

Parent Guardian (Print): _____

Parent /Guardian Signature: _____

Employer: _____

Please fill out this form and email to Registrar, Darcey Wilde (darcey.lpyf@gmail.com)