

## KOFI NTI FINANCIAL ASSISTANCE APPLICATION



Dear Parent/Guardian,

The Richmond Kickers Youth Soccer Club is a non-profit organization that strives to provide a quality soccer program to any youth who wishes to play. We are pleased to be able to offer partial financial assistance for those that qualify. The Kofi Nti Financial Assistance program is made possible through the generosity of friends who support our organization.

To apply for financial assistance, you will need to do the following:

1. Complete the enclosed application with current and accurate information.
2. Enclose one set of the following personal financial documents that reflects your current income along with a check or money order for \$150:
  - A copy of **last year's signed tax return** AND your **last two pay stubs**
  - OR a copy of **most current social security or disability check stub** AND **tax return**
  - OR a copy of **most current unemployment pay stub** AND **tax return**
3. Secure all information with this application (including Letter of Intent and Volunteer Form) and return it the Richmond Kickers Youth Soccer Club office at **2001 Maywill Street, Suite 203, Richmond, VA 23230**
4. If you have extenuating situations that must be explained, please outline them in a letter including cost of expenses (etc.) Example: Medical bills, loss of employment, etc.

Applications will not be considered unless all requested documentation and the \$150 is submitted. **The application due date is June 15.** Any application received after this date will not be reviewed until after June 30<sup>th</sup>. Once you have received notification on the status of your request, you will be 100 percent responsible for any monies owed based on the grant. A player will not be deemed eligible to participate until payment is made if money is owed. **The Kofi Nti Financial Assistance Program does not cover any uniform fees.**

Please feel comfortable that all financial information received by this office is held in strictest confidence.

Feel free to call me at the RKYSC office between the hours of 9-4; Monday through Friday should you have any questions. Once your application has been reviewed, you will be contacted as to the status of your application or to gather additional information.

Sincerely,

Emily Carnahan [emily@richmondkickers.com](mailto:emily@richmondkickers.com)  
Club Administrator  
804.644.5425 ext. 310

Please print all information clearly. Attach additional sheets as necessary.

**Part 1:**

Player's Name: \_\_\_\_\_ Team & Age Group: \_\_\_\_\_  
Parent's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone : (\_\_\_\_) \_\_\_\_\_ Evening Phone : (\_\_\_\_) \_\_\_\_\_  
Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

List full names and ages of all dependents in the household:

Full Name	Date of Birth	Gender
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**Part 2:** (Must be completed by both parents)

**Declaration of Income:**

Please include all steady forms of income you/your household receive(s) including current job, unemployment, retirement, social security, disability, child support and alimony.

	Father/Stepfather	Mother/Stepmother
Employer	_____	_____
Monthly Salary	_____	_____
Unemployment	_____	_____
Retirement	_____	_____
Social Security	_____	_____
Disability	_____	_____
Child Support	_____	_____
Alimony	_____	_____
Other (_____)	_____	_____
Other (_____)	_____	_____
<b>Total MONTHLY Income</b>	_____	_____

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**Part 3:**

We are applying for Financial Assistance for (circle one): Academy Classic Elite U9 Program.

What dollar amount do you feel you can afford to pay? \_\_\_\_\_

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**Part 4**

Everyone providing information on this form must sign below.

**I/We understand that we must fulfill the volunteer hours assigned in return for receiving this award. If our child receives a partial scholarship we understand that the hours of club service will be prorated accordingly.**

Father's (Stepfather's) Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Mother's (Stepmother's) Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This form must be returned to the RKYSC office. Please mark envelope "PERSONAL & CONFIDENTIAL".

To: Richmond Kickers Youth Soccer Club  
C/O Financial Assistance Committee  
2001 Maywill Street, Suite 203  
Richmond, Virginia 23230

All submitted  
information will be

## Richmond Kickers Youth Soccer Club, Inc.

### Letter of Intent

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ am filing this letter in conjunction with my financial assistance package. I understand that the execution of this letter confirms my/our intent to participate in the Richmond Kickers Youth Soccer Club for the \_\_\_\_\_ / \_\_\_\_\_ (fill in the year) soccer year.

I understand that by executing this letter of intent, I must abide by the following:

- My child will not participate in the tryout process for any other club located within the Richmond metropolitan area during the above season.
- My child will not accept any offer to transfer to another soccer club located within the Richmond metropolitan area during the above season.

If I/we fail to abide by the above stipulations, it is my/our understanding that I/we will forfeit the right to any financial assistance in the future with the Richmond Kickers Youth Soccer Club or any of its affiliated programs. All deposits and payments will be paid immediately upon invoicing.

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Signature and Date

### **VOLUNTEER OPPORTUNITIES**

Please check any and all that you would be interested in:

**In-Office RKYSC (Administrative)** \_\_\_\_\_ Volunteering hours to work at the RKYSC office. Duties include assisting with registration, data entry, uniform ordering & fulfillment and team administration.

**Community Outreach Programs** \_\_\_\_\_ Volunteering hours to work at the Richmond Kickers office and various sites. Duties would include sorting and filing registration forms, packaging uniforms, forming team rosters and distributing advertising literature to various locations. There will also be opportunities to volunteer as a mentor for children through our recreational programs.

### **Tournaments**

\_\_\_\_\_ Volunteering hours to work at any of the tournaments run by RKYSC. Duties include assistance in the concessions area; merchandise area, hospitality tent or providing administrative or field marshals assistance.

**Pro Game Day:** \_\_\_\_\_ Working on game day at various functions (Fun Zone, Ticket Taker, clean up, Set up, Break down, flyer distribution, concession, etc.