GUIDELINES for CLUBONE Assistance Fund

General Information:

- Individual must be a current RMR-USAV Junior Member in good standing.
- Monies will be paid at the discretion of the ClubOne Board of Directors and applied directly to the recipient's account in February to pay for fees and travel expenses.
- ClubOne Volleyball offers financial assistance to families though a need-based priority system.
- Individual must provide proof of passing grades in all school subjects.
- Individual must participate in fundraising opportunities offered by ClubOne& ClubOne will not provide scholarship funds that exceed the amount raised through such fundraising activities.
- Individual must be qualified for free/reduced lunches OR have a special circumstance for needing scholarship assistance.

Application Form/Required Information/Deadline Date:

1. Fill out the CLUBONE Individual Assistance Information below.
2. Submit a letter from parent or guardian to CLUBONE Board of Directors stating needs.
3. Submit a letter from the player to the ClubOne Board of Directors explaining why volleyball is important to her.
4. Documentation for free/reduced lunches.
5. Individual must also submit an application for an RMR Scholarship: https://docs.google.com/forms/d/e/1FAIpQLSe0FdBtQacg7gQx4tjqgc6ceSmb7qdzfvegWr25krNtsypZg/viewform
6. Submit a copy of the completed RMR scholarship form.
7. **Application must be postmarked by January 15, 2026.** Notifications will be made prior to February 1st.

All items must be submitted in order to be considered. Send the above information and this form by the deadline to:

ClubOne Volleyball
401 River Rock Drive
Johnstown, CO 80534

All ClubOne Hardship applications are reviewed by the Board of Directors. These scholarships are approved & issued at the discretion of the Board of Directors. The number of scholarships granted & the amounts funded are determined by the Board of Directors, based on need & on available funds. Every effort will be made to give fair & equal treatment to all ClubOne member applicants. Applicant information will remain confidential.

General Information

Player's Name: _____ Parent(s) Name(s): _____

Address: _____

City, State & Zip: _____

Home Telephone #: _____

ClubOne Team: _____

By signing below, individual & parent/guardian agrees to participate in fundraising activities, raising monies equal to or above the granted scholarship amount.

_____ _____ _____

Player/Applicant Signature Parent/Guardian Signature Date