

Aspen Junior Hockey

Financial Aid Application Form

All requested information must accompany this application

Financial aid will be awarded based on the following criteria:

Financial need based on last year's tax return. Please attach last year's tax form and all W-2 forms. Two parent households filing separate returns must attach both individual's last year forms. **Priority will be given to those applicants who have actively participated in the efforts of AJH or have been involved in its fund raising (i.e. Ducky Derby) and 10 hours working Fall Face Off is required!!!**

Conditions of Financial aid:

All participants receiving a financial aid must abide by the following conditions.

- Recipient must abide by AJH and USA Hockey Code of Conduct
- Recipient cannot be involved in any disciplinary actions with AJH, school or local authorities
- Recipient must pay at least 10% of this year's AJH tuition for their level of play
- Recipient is responsible for all other financial obligations, i.e. travel expenses, tournament fees, etc.

Participant's Name _____ Age _____
Mailing Address _____ Phone _____

Team for which financial aid is requested _____

Amount requested _____

Did you receive financial aid last year? _____

How much? _____ What team? _____

Please state why you are requesting financial aid.

Please make sure the application is completed in full. Attach last year's tax return and W-2 form. Use additional sheets if necessary

Please Print

Mother's full legal name _____

Physical Address _____

Mailing Address _____

Home phone _____ Work Phone _____

Father's full legal name _____

Physical Address _____

Mailing Address _____

Home Phone _____ Work Phone _____

Father's Employer _____ Gross monthly pay _____

Mother's Employer _____ Gross monthly pay _____

Did you file a joint or individual tax return last year? _____

Number of dependents claimed on last year's tax return (excluding you/or spouse) _____

Do you own or rent your primary residence? _____

If you own your residence, how much is it worth? _____

What are the balance(s) of your mortgage, if any? _____

Monthly mortgage or rent _____

Do you have any other financial obligations (i.e. student loans, college tuition, car loans, credit cards)?

_____ To Whom? _____

Are you applying for financial aid for another child in AJH? _____

Name(s) of other child/children _____

Amount requested for each _____

Amount of cash parent(s) have in financial institutions: _____

Amount of cash athlete has in financial institutions: _____

Value of any stocks or bonds you own (DO NOT INCLUDE RETIREMENT ACCOUNTS!): _____

Please feel free to use additional sheets of paper if necessary.

I hereby acknowledge that the information on this application is true and accurate. I understand that if any information on this application is not true or accurate, then AJH has the right to terminate any financial aid awarded. In this case, the applicant will be obligated to repay AJH the total amount of the awarded financial aid. I have read and understand all my obligations and responsibilities as a recipient of financial aid from AJH.

Father's Signature _____ Date _____

Print Name _____

Mother's Signature _____

Print Name _____