



Monticello Lacrosse Club

Registration Financial Assistance Application

Please complete application in its entirety and submit prior to registering. Applications must be submitted no less than five (5) business days prior to the registration deadline. Applications submitted after registration closes may not be considered. No guarantee of assistance is implied by this application.

Player's Name: _____

Team: ☐ Girls ☐ Boys; ☐ 8U ☐ 10U ☐ 12U ☐ 14U Season: ☐ Spring ☐ Summer ☐ Fall

Address: _____ City: _____ Zip Code: _____

Primary Parent/Guardian Name: _____

Primary Phone Number: _____ Primary Email: _____

Secondary Parent/Guardian Name: _____

Secondary Phone Number: _____ Secondary Email: _____

Have you previously received MLC registration assistance? ☐ YES ☐ NO

Eligibility Criteria (please acknowledge by checking all boxes that apply):

☐ Child meets all eligibility requirements to play for Monticello Youth Lacrosse.

☐ Applicant is in good standing with MLC; there are no outstanding debts.

☐ Child is receiving free or reduced school lunch for the current school year.

☐ Family is receiving medical assistance, unemployment, WIC, or other public assistance.

☐ Family is experiencing a financial hardship. Please describe:

☐ Commitment to attend a minimum of 80% of scheduled practices and games

☐ Family member(s) is willing to fulfill at least six (6) volunteer hours during awarded season. (Select from options below).

☐ Team Manager ☐ Picture Night ☐ Field prep/clean up ☐ Heggies Fundraiser

☐ Equipment Handout/Return ☐ Parent Night ☐ Riverfest ☐ Other: _____

Application Deadline and Requirements: Email completed applications to montilacrosse@gmail.com. Applications must be submitted no less than five (5) business days prior to the registration deadline for each season.

Assistance Award Date: Applicants will be notified of their assistance award status and amount awarded prior to the registration deadline.

Terms and Conditions: I will assure that my child attends at least 80% of practices, games, and team activities. I will provide support needed to allow him/her to be a productive member of the team and MLC community. I understand that MLC is a volunteer, fun, not-for-profit youth organization that relies on volunteers to support the club's program. If I am awarded assistance, I agree to volunteer and assist in any way that I can. I understand that failure to honor my commitment/obligation/task to the organization may result in the suspension of any future assistance opportunities.

Signature of Parent/Guardian

Date