Lawrence Hamnett Soccer Association PROGRAM FINANCIAL ASSISTANCE APPLICATION

Dear Applicant:

Please complete and return this application along with a copy of the most <u>Recent</u> filed Federal Income Tax Report including all documentation. <u>Incomplete applications or those submitted without all required documentation will</u> <u>not be processed</u>. Submit completed application with the necessary income records and the attached registration form to the address shown below. Allow 5 business days for processing. You will be notified of the status of financial assistance for the requested program(s) within 5 business days.

Applicant Information

Name			
Address			
Telephone (Day)	_(Evening)		
Gross Income: [most recent tax return]			
Household Size			
Child's Name(s)		_	
Please select the program your child is participating in	Travel	Recreation	Both Travel/Recreation

* ATTACH COPY of your most recent INCOME TAX REPORT, AND YOUR W-2 STATEMENT with any other verification of income. Application will not and cannot be processed without income verification information.

Please add any additional information and documentation that will be helpful in arriving at a determination.

Name			
		Date	
	Signature		
Return to:	Lawrence Hamnett SA		
	PO Box 6844		
	Lawrenceville NJ 08648		
ALL	INFORMATION WILL REMAIN CONFIDENT	IAL.	

The deadline for submitting the required form and income verification details is *Friday, October 20, 2023*, if you want to be considered for Financial Assistance for the Fall 2023/Spring 2024 Season.