



Shadow Creek Youth Football & Cheer
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www.scyfa.org

SCYFA Financial Aid Form

This form is for those applying for financial assistance. It is the intent of Shadow Creek Youth Football Association to make every effort to ensure our program is open to all interested members of the community. With this goal in mind, we have created a Financial Aid application process for existing and prospective members with a special need or consideration for them to participate. Your application will be reviewed by the board & will be assessed based upon multiple factors. We have a limited number of funds & we regret that we cannot assist everyone who applies for Aid. We will make every effort to ensure as many players as possible have an opportunity to play. **This form does not ensure you will be granted Aid, nor does it mean ALL registration and/or fundraising fees will be waived.**

Player's Name: _____ Birth Date: _____

Email: _____ Phone Number: _____

School: _____ Grade entering in Fall: _____

Parent(s) Name: _____ Name: _____

Daytime Phone: _____ Monthly net income: _____

How many children in the household under the age of 18: _____

Special Circumstances causing hardship that you would like to share: _____

How many year(s) have you been a member of SCYFA?

____ New Applicant ____ 1 Year ____ 2 Years ____ 3 or More Years

Does applicant/participant qualify for Federal free or reduced Lunch? Yes / No

Registration Fees are \$215-Flag, \$240-Cheer, and \$275-Tackle. How much do you feel you can pay? _____

***All recipients of Aid will be required to pay league fundraiser expenses. Payments must be completed before equipment can be issued. All information on this form is strictly confidential and all decisions and information with this form will be handled by the SCYFA Board members only.**

Sign

Date