



Hugo Bustamante AYSO Playership Fund APPLICATION FORM

Requests for financial assistance must be submitted to:

AYSO Region 92, 214 Main Street #507, El Segundo, CA 90245.

Completed forms must be post marked no later than Jun 30 and must include a copy of paycheck stubs and/or proof of current government financial aid or participation in a school lunch program.

PLAYER INFORMATION

1. Player's Name

2. Birth Date

3. Grade

4. Age

5. Address

5a. City

5b. State

5c. Zip

6. Gender

M

F

PARENT / GUARDIAN INFORMATION

7. Name

8. Cell Phone

9. Home Phone

10. Address

10a. City

10b. State

10c. Zip

11. E-mail

12. Please
Indicate whom
your child lives
with:

Father

Mother

Mother & Father

Other

13. Please list any additional adults living in the household

Hugo Bustamante AYSO Playership Fund - APPLICATION FORM (Page 2)

FINANCIAL BACKGROUND

14. Is your child receiving / eligible for school lunches / meals

Yes

No

15. Annual
Family Gross
Income:

16. Number of people living in the household:

Children:

Adults:

REGION INFORMATION

17. What is the
registration fee
for your AYSO
program?

18.
Region
Number

19. How much of
the Region
registration fee
can you pay?

20. When does
playing season
begin?

21. In what
Program are you
participating?

ADDITIONAL INFORMATION

22. Please provide us with some information about your financial or other situation that will assist in our decision:

23. Have you received a Playership for this Player from AYSO in the past?

24. Paycheck stubs of all adults in the household are required for final confirmation of need.
Please attach a copy with the submission.

PARENT OR GUARDIAN SIGNATURE

Signature:

Date: