

THE INTERNATIONAL SOCCER CLUB

In Mississauga



FEE ASSISTANCE APPLICATION FORM

How to Apply: Applicants must:	1 - Contact ISC to reserve a spot in your Program - you will receive a confirmation 2 - Complete and sign the attached Fee Assistance Application form. 3 - Email application, supporting documents & your program registration confirmation, to info@internationasoccerclub.ca marked as "Fee Assistance Application - Confidential"
--	---

APPLICANT (Main Contact) (or player information if player is 18 years of age or older)

Full name _____

Address _____

City _____ Province _____ Postal code _____

Phone 1 _____ Phone 2 _____ E-mail _____

SPOUSE / PARTNER (Only list if residing within household):

Full name _____

PLAYER 2 - INFORMATION

Last Name: _____ First Name: _____ Date of Birth: d/m/y _____

Programs registered for: _____

Season: Outdoor 20____ Indoor 20____ - _____ TOTAL FEES: _____

PLAYER 3 - INFORMATION

Last Name: _____ First Name: _____ Date of Birth: d/m/y _____

Programs registered for: _____

Season: Outdoor 20____ Indoor 20____ - _____ TOTAL FEES: _____

TOTAL NUMBER OF PERSONS IN FAMILY HOUSEHOLD: _____

<p>Proof of Income: Provide one for every family member 18 and over</p> <p><input type="checkbox"/> Current Notice of Assessment (Line 150)</p> <p><input type="checkbox"/> Ontario Disability Support Program (ODSP)</p> <p><input type="checkbox"/> Paystubs (Past 30 Calendar Days)</p>	<p>Total Family Income:</p> <p>\$ _____</p>
---	--

All information collected is for the sole purpose of ISC's fee reduction assessment and will be kept private & confidential. Supporting documents should be copies only as they will be destroyed once assessment is complete.

Parent signature _____ Date _____

(or player signature if player is 18 years of age or older)

FOR OFFICE USE ONLY

Amount of fee reduction approved \$ _____ Approved by _____ Date _____

Date received _____