



## Summit Softball and Baseball League Registration Fee Financial Aid Request

Summit Softball & Baseball League is a non profit organization run 100% by volunteers. The strength of our league is found in the many parents and community members that value a quality youth organization that will benefit all of the children in our community. If you are interested in requesting financial assistance for league fees, please complete this form.

**Please email a scan or picture of this form and any additional information to:**

[outsidedirector-white@summitsbl.org](mailto:outsidedirector-white@summitsbl.org)

**\*\*Your responses will be kept strictly confidential\*\***

### Personal Information

Player's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address, City, St, Zip \_\_\_\_\_ Cell Number \_\_\_\_\_

Email Address \_\_\_\_\_ League / Age Group \_\_\_\_\_

**I am requesting the following amount of financial aid \$ \_\_\_\_\_**

**Please read the statements below and initial each line:**

\_\_\_\_\_ I understand that financial aid funds are limited and no one is guaranteed financial assistance.

\_\_\_\_\_ I understand that financial aid is for registration fees only and that I will still be required to complete my (2) hours of volunteer work (per player). Please select your volunteer role during the registration process.

\_\_\_\_\_ I certify that the information I have provided is true and I have read and understand the statements above.

**Parent/Guardian name (please print) \_\_\_\_\_**

**Parent/Guardian Signature \_\_\_\_\_**