

**Mamaroneck Youth Hockey Association (MYHA)**  
**Financial Assistance Instructions**  
**2020-2021 Season**

MYHA's goal is to promote and support youth hockey in our community for all our families. The organization is sensitive to the rising costs associated with travel youth hockey and the current challenging economic climate.

Applications for financial assistance will be reviewed confidentially by the MYHA Financial Assistance Committee. MYHA's allocation of assistance will be based upon the amount of funds available, the number of qualified families seeking assistance and the demonstrated need of the applicant. All information provided to MYHA will be held in strict confidence by the committee.

To be eligible, all documentation **MUST** be completed and submitted prior to **August 1, 2020** to:

**Mamaroneck Youth Hockey Association**  
**Financial Assistance Committee**  
**PO Box 405**  
**Larchmont, NY 10538**

Mamaroneck Youth Hockey Association reserves the right to verify information requested on this form and request additional information if warranted.

All financial assistance applications will be reviewed by the committee. Applicants will be notified by August 15, 2020

The following items **MUST** be submitted as part of the application process:

1. Completed Financial Assistance application (attached).
2. First 2 pages of the 2018 and 2019 1040 tax forms of both parents (including divorced parents).
3. Copy of most recent bank statement of both parents (including divorced parents).

**Mamaroneck Youth Hockey Association  
Financial Assistance Application Form  
2020-2021 Season**

1. Please list all your children that are planning on participating in any youth hockey program (including programs other than MYHA) during the 2020-21 season:

<b>Name</b>	<b>2020-2021 Team</b>	<b>*Remaining tuition due</b>

\* Exclude any deposits already paid.

2. Parent/Guardian Information:

	<b>Father</b>	<b>Mother</b>
Name		
Address		
Town		
Phone Number		
Email Address		

The above parents/guardians are:

\_\_\_\_\_ Married to each other \_\_\_\_\_ Divorced or legally separated

If divorced or legally separated, please indicate which parent has custody and which parent will be the party responsible for the tuition.

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3. Please provide the following financial information:

	<b>Father/Guardian</b>	<b>Mother/Guardian</b>	<b>Joint/Combined</b>
Current Employer			
2019 wages, salary and or self-employment income			
Annual income from alimony and/or child support			
Other annual income			
Do you own or rent your home?			
Monthly mortgage or rent payments			
Estimated 2020 wages, salary and/or self-employment income			
Estimated fixed monthly expenses (debt, utilities, insurance, etc)			
Number of dependents			

4. Did your child/children participate in any off-season or supplemental in-season hockey programs, camps, clinics, lessons, tournaments? \_\_\_\_\_

If yes, please specify which program/camp and fees paid: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. MYHA relies on parent volunteers to keep the program running. Volunteers are needed to assist with: Kick-off BBQ, Yearbook, Team Scoring, Team Manager and End of Year BBQ. Which of these would you be able to assist with?

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6. Please provide any other information you would like us to consider (change in employment, medical conditions, dependent parent, special needs children, etc). \_\_\_\_\_

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I/we certify that the above information is true and correct. I/we authorize the MYHA Financial Assistance Committee to make whatever inquiries it deems necessary to verify the information provided. Note: this form must be signed by all custodial parents/guardians.

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Father/Guardian	Mother/Guardian
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Date	Date
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