Puyallup Juniors Volleyball Club

Financial Aid Application | 2026–2027 Season

Puyallup Juniors Volleyball Club is committed to providing opportunities for athletes to compete, regardless of financial circumstances. Financial aid is awarded based on demonstrated financial need, available club funds, and athlete commitment. All information provided is strictly confidential.

Athlete Information

- **Athlete Full Name: _____**
- **Date of Birth: ___ / ___ / _____**
- **Upcoming School Grade (Fall 2026): _____**
- **Age Group / Team Trying Out For: _____**
- **Has this athlete played for Puyallup Juniors before?** [ ] Yes [ ] No

Athlete 2 (Sibling):

- ***Full Name: _____***
- ***Date of Birth: ___ / ___ / _____ Upcoming Grade (Fall 2026): _____***
- ***Age Group / Team Trying Out For: _____***
- ***Has this athlete played for Puyallup Juniors before?*** *[ ] Yes [ ] No*

Athlete 3 (Sibling):

- ***Full Name: _____***
- ***Date of Birth: ___ / ___ / _____ Upcoming Grade (Fall 2026): _____***
- ***Age Group / Team Trying Out For: _____***
- ***Has this athlete played for Puyallup Juniors before?*** *[ ] Yes [ ] No*
    - *If yes, how many seasons? _____*

Parent / Guardian Information

- **Primary Contact Name: _____**
- **Relationship to Athlete: _____**
- **Street Address: _____**
- **City, State, Zip: _____**
- **Phone Number: _____**
- **Email Address: _____**

Financial Information & Household Size

To help us evaluate your request, please provide the following household data:

- **Number of adults living in the household: _____**
- **Number of dependent children living in the household: _____**
- **Total Gross Annual Household Income (Before Taxes):** $_____

Special Assistance Programs: Does your family currently qualify for or receive any of the following? (Check all that apply)

- [ ] Free or Reduced School Lunch Program
- [ ] SNAP / Food Stamps
- [ ] Medicaid / Apple Health
- [ ] TANF (Temporary Assistance for Needy Families)

Extenuating Circumstances (Optional)

Please use the space below to explain any specific financial hardships or sudden changes (e.g., medical expenses, job loss, multiple children playing club sports) that the board should consider when reviewing your application.

_____
_____
_____

Required Volunteer Service Commitment

Puyallup Juniors operates as a community, and our financial aid program relies on a "work-study" style partnership.

> Requirement: Families receiving financial aid are required to complete 40 hours of volunteer service within the club over the course of the 2026–2027 season.

Volunteer opportunities may include, but are not limited to:

- Assisting with club-hosted tournaments (admissions, concessions, setup/teardown)
- Gym monitoring and facility maintenance
- Assisting with Club Events

Terms and Acknowledgements

Please read and initial each point before signing below.

- **_____ Initial:** I certify that all information provided on this form and in the attached documentation is true, accurate, and complete to the best of my knowledge.
- **_____ Initial:** I understand that financial aid covers a portion of *club dues only*, and I am still responsible for travel expenses, gear/uniforms (if not included in dues), and any remaining balance.
- **_____ Initial:** I understand that receiving financial aid requires the athlete to maintain excellent attendance, effort, sportsmanship throughout the season, and complete 40 volunteer hours. Failure to meet team commitments may result in the revocation of aid.

Parent/Guardian Printed Name:
_____

Parent/Guardian Signature: _____Date: ___/___/____

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CLUB ADMINISTRATION USE ONLY

This section is to be completed by the Puyallup Juniors Board / Club Director.

- **Application Status:** [ ] Approved [ ] Denied [ ] Pended (Requires More Info)

Financial Aid Allocation Details:

- **Athlete 1 Award Amount / Percentage:**
  _____
- **Athlete 2 Award Amount / Percentage:**
  _____
- **Athlete 3 Award Amount / Percentage:**
  _____
- **Remaining Family Balance Due:** $_____

Authorization:

Club Director Printed Name:
_____

Club Director Signature: _____Date: ___/___/___