



# New Prague Lacrosse Association

## Hardship Fund Application

Date Submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Application Information:

Name (Parent(s) or Guardian(s)): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Player#1: \_\_\_\_\_ Level of Play or Birth Year: \_\_\_\_\_

Player#2: \_\_\_\_\_ Level of Play of Birth Year: \_\_\_\_\_

Player#3: \_\_\_\_\_ Level of Play of Birth Year: \_\_\_\_\_

Player#4: \_\_\_\_\_ Level of Play of Birth Year: \_\_\_\_\_

Player#5: \_\_\_\_\_ Level of Play of Birth Year: \_\_\_\_\_

Currently Employed:  Yes  No

Has your child or children participate in the Lacrosse program before?  Yes  No

Please explain the nature of your hardship:

Explain any other assistance you receive (i.e. county or state public assistance, church donation, etc....):

Type of assistance requested: Equipment only: \_\_\_\_ Registration Fee (s) only: \_\_\_\_ Both: \_\_\_\_

**\*\*All Information is kept Confidential\*\***

# Recommended Guidelines for Hardship Fund Application:

- All applications need to be received prior to registration deadlines. Submit your application by sending to [nplasecretary@gmail.com](mailto:nplasecretary@gmail.com)
- Applications will be reviewed on a case by case basis. Financial assistance is provided at the sole discretion of the NPLA Board of Directors. All information is kept confidential.
- Assistance will be granted for one year at a time per family/child. Families needing assistance in future years will need to re-apply.

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