



Confirmation of Application for Financial Assistance  
2017

(This form must be signed and returned to CodiAC Soccer)



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Player name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**To be completed by the funding organization:**

To be signed or stamped **by the funding organization** to confirm that an application of funding has been submitted for the player named above. The completion of this form does not mean that funding has been approved.

\_\_\_\_\_  
Funding organization only: Sign or stamp above

**Parent/guardian:**

Please note that this form must be signed/stamped by the funding organization when you apply for financial assistance. The completed form must then be returned to CodiAC Soccer **before** your child will be eligible to participate in CodiAC Soccer activities (this includes tryouts for competitive teams).

Parents of competitive players (First Touch): If you are applying to Jumpstart for financial assistance, you should be aware that Jumpstart covers only the registration fee. You must make other arrangements to pay the tryout fee and select fee prior to your child being issued a uniform.

\_\_\_\_\_  
Parent/guardian: please sign

Thank you,  
CodiAC Soccer