



Financial Assistance Form

Dover Little Green Cheerleading's intent is to allow as many athletes as possible the opportunity to participate in our program. Each year our league offers financial assistance to athletes on a need's basis through payment plans, partial assistance, and full assistance for registration fees only.

To fairly disburse the financial assistance funds, the information on this form must be completed.

Mail both pages of the DLG Cheer Financial Assistance form to the address below or email to dlgcheerleading@gmail.com

**DLG Cheer, P.O. Box 493, Dover, NH 03821
www.dlgcheer.com**

Name of Athlete:

| | | | |
|-------|------|--------|-----------------------|
| First | Last | School | Age and Date of Birth |
|-------|------|--------|-----------------------|

Names of Parents or Legal Guardian:

| | | | |
|--------------|------|--------------|------|
| Father First | Last | Mother First | Last |
|--------------|------|--------------|------|

| | | |
|----------------|-----------------------|------------|
| Street Address | City, State, Zip Code | Home Phone |
|----------------|-----------------------|------------|

| | | |
|-----------------|-----------------|----------------------|
| Father Employer | Mother Employer | Family Email Address |
|-----------------|-----------------|----------------------|

The following questions will be used solely to determine need for the financial assistance:

How many children or total dependents do you support in your household? _____
Number

Please circle one of the following ranges for household yearly income:

| |
|---------------------|
| Less than \$40,000 |
| \$40,000 - \$60,000 |
| More than \$60,000 |

Please describe your need for financial assistance below:

Have you previously received financial assistance from the DLG Cheer? ____No ____Yes

What years did you receive financial assistance? _____

How many years have you participated in DLG Cheer's program? _____

Would a payment plan agreement provide you the ability to pay for registration costs? ____No ____Yes

Would you be willing to participate in additional fundraising activities to cover registration costs? ____No ____Yes

The information provided on this form is accurate and we accept the requirements for financial assistance volunteer requirements:

Signature of Parent or Guardian _____ Date _____

(For Office Use Only – below this line)

The financial assistance was reviewed on: _____

Accepted Rejected

Financial Plan:

- ☐ Payment Plan Details: _____
- ☐ Additional Fundraising Required: _____
- ☐ Financial Assistance Dollar Amount Awarded: _____
- ☐ Rejected

Reason for rejection: _____

DLG Cheer Treasurer Signature _____ Date _____