# BSAA FOOTBALL

# Financial Hardship Application

BSAA Football expects to collect its fees in a timely and consistent manner. Sometimes our families encounter financial situations that temporarily prevent them from complying with our payment procedures. The purpose of this form is to provide you with a vehicle to apply for an exception to our payment procedures. Your completed form will be reviewed in an extremely confidential manner and a decision will be communicated to you within 2 weeks of your submission. Please note that additional information may be requested of you in order to properly evaluate your application.

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| **Player Name:** | |
| **Parent's Name(s):** | |
| **Telephone Number(s)** | |
| **Division:** | □Kindergarten □1st □2nd □3rd □4th □5th □6th □7th |

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|---|
| **Reason for requesting financial hardship status:** |
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| **Your proposed alternative to BSAA'S fee payment procedures:** |
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| **Parent's Signature:** |
| **Date:** |
| **Send this application to; BSAA Football PO Box 921 Blue Springs MO. 64013** |