



Missoula Youth Hockey

Financial Aid Application

The Missoula Area Youth Hockey Association (MAYHA) offers a financial aid program to benefit MAYHA youth hockey players and their families who are in need of financial assistance. While we hope that no athlete would be excluded from playing hockey due to monetary limitations, in reality, there are limited funds available. Financial assistance is available solely on the funds received by generous donors from our community.

If you would like to apply for financial aid, please complete the application form and return it to:

Email: Grace Hoene - grace@glaciericerink.com (Email preferred)

OR

Mail: MAYHA, Attn: Grace, PO Box 87, Missoula, MT 59806

Applications must be filled out completely and include all required documentation. Incomplete applications will not be accepted. **Applications are due by the registration deadline for each program.**

If financial assistance is awarded, the applicant's account will be credited with the awarded amount. All players must register online through the [DASH](#) site.

Information

- Financial assistance **may** be awarded to a maximum of 2/3 of the registration cost per player in order to assist the maximum number of Missoula-area families possible. Each player/family will be responsible for paying at least 1/3 of the MAYHA registration fees.
- Financial assistance funds are used to assist in the cost of the MAYHA registration fee and/or the equipment rental fee. Financial assistance funds **may not** be used to pay USA Hockey registration fees, or any on-road/out-of-town costs. USAH offers a [Membership Relief Grant Program](#) and families are highly encouraged to apply!
- Availability of assistance may vary year-to-year depending on donations and available funds.
- Award of financial aid for one year does not guarantee awards for subsequent years.
- Awards are at the full discretion of the MAYHA and are awarded based upon need as presented on the application form. All decisions made by MAYHA are final.
- The Youth Hockey Director will notify all applicants via email regarding the status of their application as soon as possible.
- **Applications are due by the registration deadline of each program (dates will vary for fall, winter, and spring programs).**
- All applications and attachments become the property of MAYHA.
- All application information will be kept confidential.

Application Criteria and Instructions

Financial assistance is available to any MAYHA player in good standing with MAYHA. The applicant must not be financially in arrears with MAYHA for any previous season. Financial assistance will be awarded based on financial need and a thorough review of the completed application.

Requirements for applications submission:

- Completed application form
- Copies of the most recent 30-days' paystubs (parents, guardians, players) and employer contact information. If no paystubs are available, please explain.
- **Applications are due by the registration deadline for each program (dates will vary for house and travel programs). Applications received after these dates will not be considered.**

Missoula Youth Hockey Financial Aid Application

Be sure to fill out this application in its entirety. If you are applying for more than one child, please complete one form for each child. Applications missing information, including any requested documentation, may result in the application being declined.

Date: _____

PERSONAL INFORMATION:

Player name: _____

Age: _____ Date of Birth: _____ USA Hockey Number: _____

Hockey Division (select one): 6U 8U 10U 12U 14U High School 19U

Will the player be playing (select one): Fall/Spring Winter House Winter Travel

Parent or Guardian Name(s): _____

Phone: _____ Email: _____

Address: _____

Is the player new to MAYHA? Yes No # of Siblings Playing Hockey: _____

Are you applying for financial assistance for more than one player? Yes No

If yes, please list names of applicants: _____

Has the player received MAYHA financial assistance funds in the previous year? Yes No

Has the player attended hockey camps, clinics, taken private lessons, participated in AA/Tier II hockey, or played in other leagues in the past 12 months? Yes No

If yes, please specify and detail which programs: _____

If yes, did the player receive financial assistance from the listed programs?

Yes No

Please provide detailed information regarding monetary awards/financial assistance given for each of the above-listed programs: _____

ANNUAL INCOME & VERIFICATION:

Number of Individuals in Family: _____ Number attending college: _____

Please select one regarding the annual household combined income (ie. both parents):

<input type="checkbox"/> less than \$20,000	<input type="checkbox"/> \$80,000-\$89,000
<input type="checkbox"/> \$20,000-\$ 29,000	<input type="checkbox"/> \$90,000-\$99,000
<input type="checkbox"/> \$30,000-\$39,000	<input type="checkbox"/> \$100,000-\$109,000
<input type="checkbox"/> \$40,000-\$49,000	<input type="checkbox"/> \$110,000-\$119,000
<input type="checkbox"/> \$50,000-\$59,000	<input type="checkbox"/> \$120,000-\$129,000
<input type="checkbox"/> \$60,000-\$69,000	<input type="checkbox"/> \$130,000-\$139,000
<input type="checkbox"/> \$70,000-\$79,000	<input type="checkbox"/> \$140,000-\$149,000

MAYHA requires that all applicants (parents, guardians, players, etc.) provide copies of their most recent 30-days' pay stubs, as well as contact information for their employer. Additional income verification items may be required upon request. All information provided is confidential.

Do you have other income not included on these paystubs? Yes No

If yes, please specify: _____

ADDITIONAL INFORMATION:

Please attach a brief explanation of why you and your family would like to be considered for financial assistance. Please be sure to list any extenuating circumstances that the committee should consider:

CERTIFICATION:

I certify that the above and included information is true to the best of my knowledge and ability.

Signature of Parent/Guardian

Date

PLEASE NOTE:

There is no guarantee of award of funds based upon previous year's participation or any other factors. Financial assistance awards are based upon available funds and the player/family being in good standing with MAYHA.

SUBMISSION OF APPLICATION:

Mail: MAYHA, Youth Hockey Financial Aid Committee, PO Box 87, Missoula, MT 59806

Email: Grace Hoene - grace@glaciericerink.com

Financial aid applications must be filled out completely and include all additional documentation required in this document. Incomplete applications will not be accepted. **Applications are due by the registration deadline of each program (dates will vary for house and travel programs).**

Participants must still register for the program prior to the registration deadlines. Participants should select the payment plan option when registering. If the applicants are awarded financial aid, the amount will be applied to their remaining balance.

If you have additional questions, please contact the MAYHA Youth Hockey Director, Grace Hoene at grace@glaciericerink.com