



DUKE'S ELITE FINANCIAL AID APPLICATION

Duke's Elite Lacrosse Club Grants Financial Aid based on need and available funds. Please complete this application form so that we can fairly evaluate our various members' needs. **PLAYER INFORMATION**

PLAYER'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 ST ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_ ZIP: \_\_\_\_\_  
 CURRENT SCHOOL: \_\_\_\_\_ SCHOOL FALL 2022: \_\_\_\_\_  
 TEAM AGE GROUP, GENDER & NAME: \_\_\_\_\_ COACH: \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION PARENT/GUARDIAN #1**

NAME: \_\_\_\_\_ ST \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE (HOME): \_\_\_\_\_ PHONE (MOBILE): \_\_\_\_\_  
 PHONE (WORK): \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_  
 \_\_\_\_\_ YEARS: \_\_\_\_\_ JOB \_\_\_\_\_  
 TITLE: \_\_\_\_\_ INCOME: \_\_\_\_\_

**PARENT/GUARDIAN #2**

NAME: \_\_\_\_\_ ST \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE (HOME): \_\_\_\_\_ PHONE (MOBILE): \_\_\_\_\_  
 PHONE (WORK): \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_  
 \_\_\_\_\_ YEARS: \_\_\_\_\_ JOB \_\_\_\_\_  
 TITLE: \_\_\_\_\_ INCOME: \_\_\_\_\_

Please list any other children in your family who are registered with the Duke's Elite:

PLAYER'S NAME: \_\_\_\_\_ DATE OF BIRTH: // TEAM AGE  
 GROUP/GENDER: \_\_\_\_\_ COACH: \_\_\_\_\_ PLAYER'S  
 NAME: \_\_\_\_\_ DATE OF BIRTH: // TEAM AGE  
 GROUP/GENDER: \_\_\_\_\_ COACH: \_\_\_\_\_

Level of Financial Aid requested: up to 25% up to 50% up to 75% In the past year did your family receive financial aid from any of these programs? Free or reduced-price school lunch. DSS Services (Food Stamps) Temporary Assistance for Needy Families (TANF) Financial aid for school or other sports organizations (please specify) Registration payments can be made with monthly installments. If this still does not help your current financial situation, please briefly explain why you are requesting financial aid. Please add additional sheets if necessary.

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We ask members to support Duke's Elite through volunteering. In which areas are you can help this year? Referee, Field Work, Field Marshal Coach, Tournament volunteer, Fundraising, Other (please specify) Please complete this application in full and include the following documents:

A copy of the first two pages on your 2022 filed federal tax return. If you have not yet filed your 2022 return, then please submit the first two pages of your 2021 return, along with copies of any 2022 W-2s or 1099s or other proof of income. If financial aid is granted, Duke's Elite may request the 2023 return once filed.

Any additional documentation that will demonstrate a need for financial aid. All information provided with this application will be held in the highest confidence. All supporting documents will be shredded once the amount of financial aid has been determined. Please white out any social security numbers. Please scan and e-mail this signed application and supporting documents to [accounting@DukesEliteLC.com](mailto:accounting@DukesEliteLC.com) Duke's Elite has limited funds available for financial aid. Your honesty in completing this application will ensure that these funds are allocated to those families most in need. Everything stated in this application is true and complete to the best of my knowledge.

Parent/Guardian

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



Headquarters

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