

**Iron Range Hockey Financial Assistance Application**

Player Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_ Division: \_\_\_\_\_

City \_\_\_\_\_ Phone: \_\_\_\_\_

Custodial Parent \_\_\_\_\_ Custody Percentage \_\_\_\_\_

If legal custody percentage is less than 75%, both parents must report their income below.  
Separate forms may be filed for each parent.

Address: \_\_\_\_\_ City: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer 2: \_\_\_\_\_ Phone: \_\_\_\_\_

Most recent Federal tax return filing status \_\_\_\_\_

(Choices are: Single, Head of household, Married filing jointly or Married filing separately). If status is married filing jointly or married filing separately, both adults must report their income even if one is not the biological parent of the player.

Total member of household \_\_\_\_\_ as claimed on most recent federal tax return. (Your reported exemptions plus dependents)

Household income PER MONTH: include all income reportable on your federal tax return including W2 and 1099 income, investment income, alimony, child support, social security etc.

Name _____	Source _____	Amt _____
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Name _____	Source _____	Amt _____
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Name _____	Source _____	Amt _____
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Name _____	Source _____	Amt _____
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I assure Iron Range Hockey the above information is correct to the best of my knowledge. I authorize IRHA to verify the financial information if necessary and understand supplying false information may disqualify my child's grant.

\_\_\_\_\_

Parent(s)/Guardian(s) Signature(s) \_\_\_\_\_  
Date