

Financial Aid Request

St. Charles Storm Basketball Organization

Financial assistance is available for children of need, as approved by the board president on a case by case basis. All applicants should submit this form as complete as possible. All information will remain confidential.

Name _____

Address _____ Town _____ Zip _____

Phone _____ E-mail _____

How many children do you have in the program?

Bitty _____ In-House _____ Travel _____

What percentage of the applicable fees are you requesting assistance? _____

Would a payment plan help to alleviate the burden of the cost? _____

Reason for the application and other comments:

Signature _____ Date _____

Submit to: Board President – St. Charles Storm PO Box 3451, St. Charles, IL 60175 or fax to 630-377-3306 or e-mail to bballconrad@sbcglobal.net and type in reference – Application for Assistance.

For Board Use

Board Approved amount _____ Date _____

Details:

