

Sparta United Financial Assistance Agreement

As the recipient of financial assistance from Sparta United for the 2026/2027 Season, I agree to the following terms:

- My son/daughter will attend games, practices and club training sessions. If my son/daughter cannot be in attendance, I will notify the coach, in advance, to explain the reason for the absence.
- My son/daughter will be committed to the Sparta United Soccer Club for the entire 2026-2027 seasonal year, and will not transfer to any other Club or Team. The transfer to another Club or Team, will result in my son/daughter losing his/her financial assistance from the Sparta United Soccer Club and will require the full payment of the entire Sparta club fees for the year. If my son/daughter does not fulfill this obligation, the player will be put in bad standing with the club and UYSA (Utah Youth Soccer Association). **Bad standing**: a player cannot participate in practices and scheduled league games and it also prevents the player from transferring to another club.
- I will help the team administration with team duties and functions. (i.e., setting up and taking down nets and corner flags, fund raisers, etc.). Our family will volunteer for the United Champions Cup.
- **I understand failure to comply will result in a loss of my financial assistance.**
- My son/daughter will participate in Team Fundraisers.

With my signature, I agree to all of the aforementioned terms. If I fail to comply in any way with the aforementioned terms, I understand that my **financial assistance can be terminated** at the Sparta Club's sole discretion.

Parent Name (printed) _____ Parent Signature _____

Player's Name (printed) _____ Player's Signature _____

Team Coach Name (printed) _____ Team Coach Signature _____

Team Name/Year/Gender _____

Parents Telephone Number _____ Parents Email Address _____

Have you ever received a financial assistance from the Sparta United Soccer Club in the past (Yes___) or (No___)

- (1) **A letter must be attached to this Form, stating the reason for the requested financial assistance above. (2) Proof of income from most recent Tax Returns 2025, (both Father and Mother). (3) Latest Spring 2026 school grades report. The submitted form including coaches' approval and signatures, will then be reviewed for possible consideration. All financial assistance requests **MUST** be received by **June 11, 2026**.**
- (2) **Any forms received after this date, will NOT be accepted. Parents will be notified of the decision by June 22, 2026. Office Hours are Monday-Thursday 10:00am-1:00pm, 7109 South Highland Drive Suite 102, Cottonwood Heights, UT 84121 or Mail to the same address. I understand that if I do not complete item (1) (letter requesting reason for financial assistance), and (2) (submission of 2025 Tax Returns), and (3) latest Spring 2026 school grades report, my son or daughter, will NOT be considered for financial assistance. No financial assistance will be given to the younger age-groups U6-U8. After receiving financial assistance, you will pay in FULL all your personal Team expenses. (Finance charges are not included).**

Special Note: Please register online to your team and select the longest payment plan. Once Financial Assistance is given, the payment plan will be adjusted. Players/parents will be responsible for paying the remaining amount. (Financial Assistance) is limited and only partial amounts are available for the people with lower income status.