TELLURIDE™
SKI & SNOWBOARD CLUB

APPLICATION FOR FINANCIAL ASSISTANCE

We offer a financial aid program for families in strict financial need or extraordinary financial hardship.

PLEASE do NOT sign up for Financial Aid if a payment plan is what your family needs!
We provide very generous payment plans to help break the cost up **over the course of the season.**

All of the following information ***must*** be completed to be considered for financial assistance:

CHECKLIST:

1. _____ Applications must be received no later than September 20th
LATE APPLICATIONS WILL NOT BE CONSIDERED!

2. _____ One parent-signed application per child applying for financial assistance (attached, 2 pages)

3. _____ Copy of individual previous year's income tax return (Form 1040 — both sides)**

OR

Copy of household's previous year income tax returns, if more than one caregiver/guardians filing separately (Form 1040 - both sides)**

5. _____ Net Asset & Liabilities Calculation Worksheet (attached, 2 page)

***Additional financial information may be requested*

APPLICATION FOR FINANCIAL ASSISTANCE

All information to remain confidential. Applications must be received no later than September 20th. Late applications *will not be considered*.

APPLICANT(S) NAME _____

Date of Birth _____ Grade_____ School _____Years in TSSC_____
Date of Birth _____ Grade_____ School _____Years in TSSC_____
Date of Birth _____ Grade_____ School _____Years in TSSC_____

Discipline(s) (please check one per child): ▫ Gravity ▫ All/Big Mountain FreeRide
▫ Alpine▫ Freestyle moguls ▫ FreeRide Park ▫ Snowboard ▫ Telemark

Name of program(s) applying for _____ Total Cost: _____
Name of program(s) applying for _____ Total Cost: _____
Name of program(s) applying for _____ Total Cost: _____

Parent(s)/Guardian(s) Name*_____
* Person(s) financially responsible for child

Parent Email Address:_____ Parent phone: _____

Mailing Address _____ City _____ ST____ Zip _____

Phone Parent #1: Home_____ Work _____ Other _____
Phone Parent #2: Home_____ Work _____ Other _____

Parent/Guardian's Employer_____

Other Parent/Guardian's Employer _____

1. How much financial assistance are you requesting from TSSC for this applicant and why are you requiring assistance?

2. If a single parent, will both parents be sharing in the costs of the applicant's tuition, ski racing/traveling fees and expenses?

3. Would your child(ren) agree to participate in 90% of all their programs' practices and local events? Yes_____ No_____

4. Are you receiving monetary support, from any source, for the skiing activities of the applicant? Yes_____ No _____ If yes, please explain.

5. Has the applicant receive financial assistance from TSSC in the past? Yes_____ No___

   If yes, please state amount $_____. If no, did you apply for financial assistance for the previous season? Yes _____ No _____

6. Did you work off your required 20 work credit hours last year? Yes ____ No ____ N/A ____
   If no, please explain.

7. **Please provide** a copy of your previous year individual income tax return (Form 1040 only – both sides) OR your household's previous year income tax returns, if more than one caregiver (Form 1040 only – both sides).

8. Please list any additional conditions that affect your financial position that are pertinent to helping us determine where the greatest needs lie among the families who desire financial assistance.

9. Please total your **Gross Income** of the past 12 months from the following sources:

Household	or	Individual Applicant	
_____		_____	Income From Employment (includes income on W2 and 1099 forms such as ages, salaries, overtime pay, commissions, fees, tips, and bonuses, and any other employment income from partnerships or S corporations).
_____		_____	Benefit Payments (includes Social Security, SSI, Workers' Compensation, Disability pay or benefits, unemployment benefits, severance pay, annuities, pensions, retirement or death benefits)
_____		_____	Alimony and/or child support
_____		_____	Interest, dividends, and other income from household assets (includes interest from bank accounts or bonds, dividends from stocks or mutual funds, income distributed from trust funds, etc.)
_____		_____	Re-occurring/one-time monetary gifts from family members
_____		_____	Rental Income (includes income from renters/roommates)
_____		_____	Other capital income (includes multiple year capital gains, royalties)
_____		_____	Other Income (please specify): _____
=_____		**_____**	**TOTAL GROSS HOUSEHOLD INCOME**

10. Do you, your spouse, or any of your dependents own other property within the Telluride School District? Yes _____ No _____. If yes, describe the type (free market, deed restricted; residential, commercial; improved, unimproved; etc.) and location of each such property:

_____

_____

11. Please complete the net Assets Calculation Worksheets (following) and enter your total household NET ASSETS here: _____.

12. Please indicate which public or community service groups you are involved with:

_____

I hereby certify that all the above information is true and correct and acknowledge that failure to complete this entire application and/or submitting false information may disqualify my child from financial assistance. I agree to complete my required 20 work credit hours for the season. Should I receive and accept financial assistance from the Telluride Ski & Snowboard Club, I agree to adhere to the policies set forth by the Financial Assistance Committee.

_____

Parent/Guardian Signature Date

Financial Assistance applications must be postmarked or received by the TSSC Office no later than deadline posted above. Late applications will not be considered.

Please deliver your completed application to TSSC's Programs Manager subject FA Committee no later than *deadline posted above. Late applications will not be considered:*

Mail Delivery:

Telluride Ski & Snowboard Club
CONFIDENTIAL
ATTN: FA Committee
P.O. Box 2824
Telluride, CO 81435
Fax: 970-728-9438

Physical Delivery (deposit in envelope provided at office under Programs Manager door during business hours):

TSSC Headquarters
300 Mahoney Dr.
Unit C-4
Telluride, CO 81435

Email Delivery (scan & email to):

Programs Manager office@tssc.org
Subject: FA Committee

Net Asset Calculation Worksheet

Assets (What you *own*)

	Applicant	*Co-Applicant (if any)*	*Check If Jointly Held*
Cash:			
Cash On Hand	$_____	$_____	_____
Checking Account	$_____	$_____	_____
Saving Account	$_____	$_____	_____
Money Market Funds	$_____	$_____	_____
Cash Value of Life Insurance	$_____	$_____	_____
Anticipated Gift(s) towards Down Payment	$_____	$_____	_____
Other	$_____	$_____	_____
Real Estate / Property (Fair Market Value):			
Home(s) in San Miguel County	$_____	$_____	_____
Land in San Miguel County	$_____	$_____	_____
Home(s) outside San Miguel County	$_____	$_____	_____
Land outside San Miguel County	$_____	$_____	_____
Other	$_____	$_____	_____
Investments (Market Value):			
Certificates of Deposit	$_____	$_____	_____
Stocks	$_____	$_____	_____
Bonds	$_____	$_____	_____
Mutual Funds	$_____	$_____	_____
Annuities	$_____	$_____	_____
Retirement Funds	$_____	$_____	_____
Other	$_____	$_____	_____
Personal Property (Present Value):			
Automobiles	$_____	$_____	_____
Recreational Vehicle / Boat	$_____	$_____	_____
Home Furnishings	$_____	$_____	_____
Appliances and Furniture	$_____	$_____	_____
Collections	$_____	$_____	_____
Jewelry and Furs	$_____	$_____	_____
Other	$_____	$_____	_____
Business Assets (Present Value):			
All	$_____	$_____	_____

Individual Assets $_____ + $_____

Total Gross Household Assets = $ _____

Liabilities (What you *owe*)

	Applicant	*Co-Applicant (if any)*	*Check If Jointly Held*
Current Debts:			
Household e.g., Lease Obligation	$_____	$_____	_____
Business	$_____	$_____	_____
Medical	$_____	$_____	_____
Credit Cards	$_____	$_____	_____
Department Store Cards	$_____	$_____	_____
Back Taxes	$_____	$_____	_____
Legal	$_____	$_____	_____
Other	$_____	$_____	_____
Mortgages:			
Home(s) in San Miguel County	$_____	$_____	_____
Land in San Miguel County	$_____	$_____	_____
Home(s) outside San Miguel County	$_____	$_____	_____
Land outside San Miguel County	$_____	$_____	_____
Other	$_____	$_____	_____
Loans:			
Bank / Finance Company	$_____	$_____	_____
Bank / Finance Company	$_____	$_____	_____
Automobile	$_____	$_____	_____
Recreational Vehicle / Boat	$_____	$_____	_____
Education	$_____	$_____	_____
Life Insurance loan	$_____	$_____	_____
Personal (from family and/or friends)	$_____	$_____	_____
Business (other than primary)	$_____	$_____	_____
Other	$_____	$_____	_____
Other: (collections, furs, art)			
	$_____	+ $_____	

= $ _____

Total Assets	Minus	Total Liabilities	=	Household Net Assets
$_____	--	$_____	=	$ _____