

THE WILL CAMPAGNA CHILDREN'S CHARITY

Application for Assistance

The WCCC will take into account all information provided by the applicant and any additional information requested by the WCCC. The final determination will be made by the WCCC Board on a case-by-case basis. The WCCC Board will consider all factors before making any decisions.

Family Information

Child's Name _____ Sex _____ Birthdate _____

Address _____ City, State, Zip _____

School & School District _____ Current Grade _____

Date of Application _____

Father

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Mother

Name: _____

Address: _____

City, State, and Zip: _____

Email: _____

Please list siblings living with child (under age 18):

<u>Name</u>	<u>Age</u>	<u>Sex</u>	<u>Name</u>	<u>Age</u>	<u>Sex</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

What sport is your child interested in playing or what is the educational need?

What is the contact information for the league (name, address, phone number, web address, email)?

What equipment is required for the program and what are the child's sizes for each item?

When does the season start? _____ When is equipment needed? _____

Will you need financial assistance for registration fees? _____ Cost for registration: _____ per year/season

When are registration fees due? _____

1. Purpose of the application (one sentence about specific need; for example "Fees for Little League" or "Equipment for ice hockey"): _____

2. What are the circumstances affecting your inability to afford organized sports and/or education for your child (ren)? (Please write on the back if you need more space-your privacy will be respected):

3. Have you contributed to your community (i.e. volunteer work through your church or nonprofit organization)? If yes, please explain: _____

The following information is for statistical purposes required by the organizations that help WCCC to keep growing and servicing kids in our communities. It is not required by law.

Gross Family Income (please check one):

- \$0-\$25,000
- \$25,001-\$49,999
- \$50,000-\$75,000
- \$75,001-\$99,999
- \$100,000+

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: White Black or African American
 Asian Native Hawaiian/Pacific Islander
 American Indian/Alaskan Native Mix of races

Religion: _____

*****All information will be kept confidential and will be used solely by WCCC in determining qualification for its programs.*****

*If you require assistance paying for registration fees or fees and equipment, please provide the following documentation along with the application:

*Most recent tax returns (first 2 pages only)

DHS Determination

*Unemployment Determination or paystub from unemployment

Most recent paystub

Most recent W-2(s)

*Note: While the WCCC does not base its disbursements solely on income, the Board reserves the right to request pertinent documentation, including but not limited to: tax returns, bank statements, death certificate, letter verifying employment status, letter of foreclosure, or divorce settlements.

**Registration fees will be paid directly to the league. A receipt will be required from the league upon payment.

***WCCC is not responsible for the sanitation/cleaning of equipment provided. It is the responsibility of the applicant to clean his/her own equipment.

****WCCC is not responsible or liable for any injury that a child sustains while wearing the equipment that was donated.

Father's signature _____ Date _____

Mother's signature _____ Date _____

Please mail or Email application to WCCC:

Mailing Address: Will Campagna Children's Charity
19810 W. Catawba Avenue, Suite A1
Cornelius, NC 28031

Email Addresses: Tony Campagna tony@willscharity.org
Vince Campagna vince@willscharity.org
Betty Campagna betty@willscharity.org

TO BE COMPLETED BY WCCC:

WCCC representative signature application received _____ Date received _____

Equipment distributed and sizes:

Date distributed to applicant: _____

Amount of registration fee paid: _____ Date paid: _____

Receipt received from league: _____ Date received: _____

Notes:

