



# Tennis Memphis Financial Assistance Application 2016-2017

(All information will be kept confidential)



**Only COMPLETE applications will be accepted.** We reserve the right to request any additional documentation to help determine eligibility. Financial assistance varies for each program. Awards are not retroactive. *It is the goal of Tennis Memphis to turn no one away because of inability to pay. Application may be submitted anytime during the year. This application is not to be considered a guarantee of financial assistance.*

For income verification purposes, please provide **ALL** the following documents if applicable:

- Your **2015** federal income tax return (*needs to be signed on page 2*)
- 2015 W-2 Wage and Tax Statement from all employers. (include w-2 forms for all persons the household)
- Last 3 pay stubs
- Government Assistance documentation
- Unemployment, Disability or SSI Benefits documentation
- For foster children only provide a copy of stipend from DCS

Make \$15 application payment.

- \$15 application fee is a non-refundable** fee. Any difference will be applied towards the program's cost based on the family's eligibility. Make check or money orders payable to Tennis Memphis.

Which programs/clinics are you applying to:  Junior Development  NJTL Tennis Summer Camps

USTA Junior Team Tennis  Tennis & Tutoring (TNT)  Other: \_\_\_\_\_

**COMPLETED applications should be dropped off at:** Leftwich Tennis Center c/o Bob Mebane  
4145 Southern Avenue Memphis, TN 38117

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Total Annual Income: \$ \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Total Annual Income: \$ \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

List first and last name of child(ren) participating in Tennis Memphis Programs: \_\_\_\_\_

\_\_\_\_\_

How many TOTAL children in your household? \_\_\_\_ How many are claimed as "dependents" for federal income tax purposes? \_

How many TOTAL adults are in your household? \_\_\_\_

Are there any other circumstances to be considered? (For example, recent employment termination, adult dependents, etc.)

\_\_\_\_\_  
\_\_\_\_\_

**Monthly Income/Expenses Worksheet** – Applications will be denied if incomplete.

**Applicants may be asked to provide documentation to verify their expenses.**

Income: Please indicate MONTHLY amounts

Expenses: Please indicate MONTHLY amounts

\$\_\_\_\_\_1) Applicants Gross Monthly Income

\$\_\_\_\_\_1) Rent/Mortgage (Circle One)

\$\_\_\_\_\_2) Other Adult(s) Gross Monthly Income

\$\_\_\_\_\_2) Auto Loan

\$\_\_\_\_\_3) Child Support

\$\_\_\_\_\_3) Utilities

\$\_\_\_\_\_4) Social Security or Disability

\$\_\_\_\_\_4) Phone (Listed in your name)

\$\_\_\_\_\_5) Welfare (submit copy of card)

\$\_\_\_\_\_5) Child Support

\$\_\_\_\_\_6) Food Stamps

\$\_\_\_\_\_6) Medical

\$\_\_\_\_\_7) Unemployment

\$\_\_\_\_\_7) Child Care

\$\_\_\_\_\_8) Foster Child Stipend

\$\_\_\_\_\_8) Food

\$\_\_\_\_\_9) Other (please explain)

\$\_\_\_\_\_9) Gas

(Example: Trust Fund, savings account, etc.)

\$\_\_\_\_\_10) Other (please explain)

Total Monthly Income \$ \_\_\_\_\_

Total Monthly Expenses \$ \_\_\_\_\_

Total Annual Income \$ \_\_\_\_\_

Total Annual Expenses \$ \_\_\_\_\_

Do you presently receive financial assistance for tennis from any other source? (circle) yes no

If yes, please explain. \_\_\_\_\_

Name three tennis goals for the next three years: \_\_\_\_\_

Current participant in Tennis Memphis program: (circle) yes no

Current USTA Ranking if applicable: Division: (circle) Boy or Girl Age Group: (circle) 10's 12's 14's 16's 18's

State # \_\_\_\_\_ Southern # \_\_\_\_\_ National # \_\_\_\_\_

Provide Brief Tennis Playing History: \_\_\_\_\_

List any other tennis programs or academies your child has attended along with dates of attendance:

Current grade school or high school: \_\_\_\_\_

Current grade point average: \_\_\_\_\_

Community Involvement/ Volunteer Work : \_\_\_\_\_

Honors/Achievements: \_\_\_\_\_

Are you and/or your child willing to volunteer at Tennis Memphis? (circle) yes no

Specific area of interest: \_\_\_\_\_

\*\* Scholarship players must maintain 85% attendance or higher in the program with no unexcused absences.

**I certify that all the above information and financial documents are truthful and accurate. Incomplete, false or misleading information will result in cancelling the application and/or any awarded financial assistance.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Questions, contact Arnold Thompson 901-596-0637 or at athompson@tennismemphis.org**

Office Use:  
Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Checklist (**MUST be COMPLETE**):  
Application, Income verification  
\$15 non-refundable fee:  
Receipt # \_\_\_\_\_