



## **Cedar Stars Soccer Academy Financial Aid Application – North Division 2026-27 Season**

We understand that soccer can be an expensive sport. We are committed to offering the highest quality programming at the most affordable price. Our goal is to offer the highest value possible for every dollar spent on soccer. Cedar Stars Soccer Academy is pleased to offer a Financial Aid program to help families offset club fees. The club has a limited number of financial aid available and the number of players receiving aid and the amount of the aid will vary depending on the funds available.

In order to be considered for a Financial Aid scholarship, applicants must have been offered and accepted a roster spot on one of our Cedar Stars Soccer Academy teams. The player must be registered and have paid a deposit to the club. The deposit is required before the application can be approved. This can be done by checking the acceptance email that was sent to your email from Blue Sombrero.

If financial aid is awarded it reduces monthly club fees, financial aid does not cover 100% of club fees. All scheduled payments must be made until notified that financial aid has been awarded.

**\*\*Team fees, travel expenses, club volunteer hours will be at the expense of the player.**

### **FINANCIAL AID GUIDELINES/CRITERIA/ELIGIBILITY:**

#### **Guidelines:**

1. Financial need must be demonstrated for consideration. Economic hardship will be the only factor in awarding Financial Aid. No one will be disqualified from consideration because of sex, race, color, creed or religious beliefs.
2. While we try to address as much of the need as possible, Financial Aid amounts will be based on the number of players demonstrating need, the extent of that need and the budget available for Financial Aid that year.
3. Financial Aid awards will be reviewed on a yearly basis or in the event they join after the start of a season.
4. **NO** player will receive financial aid for 100% of their tuition fees
5. Any unpaid league fees from prior seasons will result in an applicant being ineligible for Financial Aid.
6. It is suggested that Financial Aid recipients volunteer their time back to the club when requested.
7. **Applications MUST be received by 08/18/26 (U7 – U14 Players) or they will not be considered. For U15 – U19 Players, we will consider applications up until 02/02/27.**
8. Applications that are not filled out completely will not be considered.
9. Applications must be filled out by the parent/guardian requesting aid. Applications cannot be filled out by coaches, team managers, children or friends.
10. Qualify based on USDA household income guidelines for the current year (chart below)
11. If a player decides to leave us in the middle of the season for another club, the full balance is due unless proof that they are relocating to a different state is provided.



## 2026-27 Poverty Guidelines for the 48 Contiguous States & District of Columbia

<i>Number of Persons in Family/Household</i>	<i>Poverty Guideline</i>
1	\$15,960.00
2	\$21,640.00
3	\$27,320.00
4	\$33,000.00
5	\$38,680.00
6	\$44,360.00
7	\$50,040.00
8	\$55,720.00

Reference Source: <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

\*\*\*\* The 2026-27 poverty guidelines are in effect as of January 13, 2026

\*\*\* For families/households with more than 6 persons, add \$5,680.00 for each additional person.

### Financial Aid Criteria/Eligibility:

- Family needs
- Number of children in a family
- Number of players in CSA Soccer
- Family Income
- Overall Financial Situation
- The player applicant must be a full-time student with a GPA of 2.0 or above

After Financial Aid is awarded, the remaining balance of player registration fees must be paid in full by February 15th, 2027 unless an approved payment schedule is in place. Failure to maintain good financial standings with CSA will result in a player being ineligible to participate in practice and games.



## INSTRUCTIONS FOR COMPLETING THE FINANCIAL AID APPLICATION FOR CSA:

### Documents Needed:

1. Complete all requested information on the application for financial aid.
2. Attach a copy of completed IRS 1040 form (front and back) from the most recent tax year
3. Copy of a valid photo ID
4. Copy of a utility bill matching the address on the government ID
5. Proof of most recent semester report card

### Signature & Mailing:

Sign and date the form. Please make sure all the above documents are included. **No application will be reviewed unless we have all five documents submitted and deposit is made. NO EXCEPTIONS!**

1. Send or drop off the application for Financial Aid to Cedar Stars Academy at:  
**Cedar Stars Academy, 3 Empire Blvd. South Hackensack, NJ 07606**  
**RE: Financial Aid Board**

Or

2. Email the completed forms and needed documents to [north.tryouts@cedarstars.com](mailto:north.tryouts@cedarstars.com)

### *Application for Financial Aid*

#### Name of Player(s) in CSA:

1. Player's Full Name (Print) \_\_\_\_\_ Member Since: \_\_\_\_\_  
Current Team & Age Group \_\_\_\_\_
2. Player's Full Name (Print) \_\_\_\_\_ Member Since: \_\_\_\_\_  
Current Team & Age Group \_\_\_\_\_
3. Player's Full Name (Print) \_\_\_\_\_ Member Since: \_\_\_\_\_  
Current Team & Age Group \_\_\_\_\_

#### Name of Parents or Legal Guardian:

\_\_\_\_\_  
Father: First Last

\_\_\_\_\_  
Mother: First Last



Home Street Address:  
Zip Code

City, State

Email

Best **Phone Number** to Be Reached At

**The following questions will be used solely to help determine need for financial aid:**

How many children or total dependents do you support in your household? \_\_\_\_\_

Financial Aid is for the year of: \_\_\_\_\_

Please check one of the following ranges for yearly household income:

Less than \$20,000

\$21,000 to \$50,000

\$51,000 to \$100,000

\$100,000 +

Please describe your need for financial aid below:

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**Cedar Stars Academy cannot guarantee financial aid for all applicants. You will be notified of the status of your application upon review.**

By signing, I attest that the documents and information provided for Financial Aid review is accurate:

Signature of Parent or Guardian Completing Application

Date



**For Office Use Only (below this line)**

**This scholarship/Financial Aid was reviewed on: (Date) \_\_\_\_\_ Division:**  
\_\_\_\_\_

**Name of Player (s):** \_\_\_\_\_

**Age Group:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Parent's Contact number:** \_\_\_\_\_

**Photo ID:**  Yes  No **Income Tax:**  Yes  No **Utility Bill:**  Yes  No **Statement:**

**Most Recent Report Card:**  Yes  No

**Total Cost of Program:** \_\_\_\_\_

**Member Since:** \_\_\_\_\_ **Accounting Dept Balance as of:** \_\_\_\_\_

**Sibling(s) in the Club:**  Yes  No **Sibling(s) Name:** \_\_\_\_\_

**Child of Staff:**  Yes  No **Staff's Name:** \_\_\_\_\_

**Previous Financial Aid:**  Yes  No

**Which season they received Financial Aid if yes:** \_\_\_\_\_

**Asked for Coach rating:**  Yes  No

**Coaches Name for team:** \_\_\_\_\_

**Coaches Rating:** \_\_\_\_\_ **Number of players on Roster:** \_\_\_\_\_

Accepted  Partial Payment: \_\_\_\_\_

Full Payment: \_\_\_\_\_

Discount: \_\_\_\_\_

Payment Installments: \_\_\_\_\_

Rejected \_\_\_\_\_ **Reason for rejection:** \_\_\_\_\_

**GM/Divisional Manager Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Club Executive Director Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Volunteer (For any team):**  Yes  No

**Parent will be notified about balance either by:**  Phone Call  Email

**Date Meeting was held:** \_\_\_\_\_