# 2026-2027 BYHA Application for Financial Assistance

Complete one application per household. Please use a pen (not a pencil).

**Step 1:** List children who are participating in BYHA this year. *If more spaces are required for additional names, attach another sheet of paper.*

| Child's First Name | MI | Child's Last Name | BYHA Player Level | **Household size** |
|---|---|---|---|---|
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**Step 2:** Report Income for ALL Household Members of players primary residence

Definition of **Household Member**. "Anyone who is living with you and shares income and expenses, even if not related."

Definition of **Primary Residence**. "This is either the sole residence of the child or the household they live the majority of the time according to a joint custody arrangement."

Definition of **Secondary Residence**. "When a joint custody agreement is involved, this is the additional parent/guardian household not listed as the primary residence that the child lives in."

**A. Child Income**

Sometimes children in the household earn income. Please include the TOTAL income earned by all infants, children, and students (up to and including grade 12) who live in the household. If they do not receive income from any source, write "0". If you enter "0" or leave any fields blank, you are certifying (promising) that there is no income to report:

| | Child Income | How Often? | | | |
|---|---|---|---|---|---|
| | | Weekly | Bi-Weekly | 2x Month | Monthly |
| | | | | | |
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**B. All Adult Household Members (including yourself) of the <u>primary</u> residence of the individuals listed in Step 1**

List all Household Members not listed in STEP 1 (including yourself) **even if they do not receive income**. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars only (no cents). If they do not receive income from any source, write "0". If you enter "0" or leave any fields blank, you are certifying (promising) that there is no income to report.

| Last Name | First Name | Earnings from Work | How Often? | | | | Public Assistance/Child Support/Alimony/ SSI/VA Benefit | How Often? | | | | Pension/Retirement/Social Security/Other Income | How Often? | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Weekly | Bi-Weekly | 2x Month | Monthly | | Weekly | Bi-Weekly | 2x Month | Monthly | | Weekly | Bi-Weekly | 2x Month | Monthly |
| | | | | | | | | | | | | | | | | |
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**C. All Adult Household Members of the secondary residence (if applicable) of the individuals listed in Step 1**
List all Household Members not listed in STEP 1 **even if they do not receive income** for the secondary household. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars only (no cents). If they do not receive income from any source, write “0”. If you enter “0” or leave any fields blank, you are certifying (promising) that there is no income to report. I

☐ **Check here if the child(ren) listed in Step 1 do not have a secondary residence (Move to Step 3)**

| First Name | Last Name | Earnings from Work | How Often? | | | | Public Assistance/Child Support/Alimony/ SSI/VA Benefit | How Often? | | | | Pension/Retirement/Social Security/Other Income | How Often? | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Weekly | Bi-Weekly | 2x Month | Monthly | | Weekly | Bi-Weekly | 2x Month | Monthly | | Weekly | Bi-Weekly | 2x Month | Monthly |
| | | | | | | | | | | | | | | | | |
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| **Step 3**: Contact Information and adult signature. Return completed form to BYHA, PO Box 1262, Beloit, WI 53512 by October 1, 2026. | | | | | |
|---|---|---|---|---|---|
| “I CERTIFY (promise) that all information on this application is true and that all income is reported.” | | | | | |
| | | | | | |
| Street Address | City | ST | ZIP | Phone Number | Email |
| | | | | | |
| | | | | | |

| Printed Name of Adult Completing this Application | Signature of Adult Completing this application | Today’s Date |
|---|---|---|
| | | |

| INSTRUCTIONS | Source of Income |
|---|---|

| Sources of Income for Children | | Sources of Income for Adults | | |
|---|---|---|---|---|
| Sources of Child Income | Example(s) | Earnings from Work | Public Assistance / Alimony / Child Support | Pensions / Retirement / All Other Income |
| – Gross earnings from work | – A child has a regular full or part-time job where they earn a salary or wages | – Gross salary, wages, cash bonuses<br>– Net income from self-employment (farm or business); **FARM**—refer to line 18 of Schedule 1 or line 34 from Schedule F; **BUSINESS**—refer to line 12 of Schedule 1 or line 31 from Schedule C.<br><br>If you are in the U.S. Military:<br>– Basic pay and cash bonuses (do NOT include combat pay, FSSA, or privatized housing allowances)<br>– Allowances for off-base housing, food | – Unemployment benefits<br>– Worker's compensation<br>– Supplemental Security Income (SSI)<br>– Cash assistance from State or local government<br>– Alimony payments<br>– Child support payments<br>– Veteran's benefits<br>– Strike benefits | – Social Security (including railroad retirement and black lung benefits)<br>– Private pensions or disability benefits<br>– Regular income from trusts or estates<br>– Annuities<br>– Investment income<br>– Earned interest<br>– Rental income<br>– Regular cash payments from outside household |
| – Social Security<br>– Disability payments<br>– Survivor's benefits | – A child is blind or disabled and receives Social Security benefits<br>– A parent is disabled, retired, or deceased, and their child receives Social Security benefits | | | |
| – Income from person outside the household | – A friend or extended family member regularly gives a child spending money | | | |
| – Income from any other source | – A child receives regular income from a private pension fund, annuity, or trust | | | |

**Do not fill out** **For BYHA Use Only** Annual Income Conversion: Weekly x 52, Bi-Weekly (Every 2 Weeks) x 26, Twice a Month x 24, Monthly x 12

| Total Income | How often? | | | | | Household Size | Eligibility | | | Date Denied Mo./Day/Yr. | Reason for Denial or Withdrawal |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Weekly | Bi-Weekly | 2x Month | Monthly | Yearly | | Half | Three Quarters | Denied | | |
| | ☐ | ☐ | ☐ | ☐ | ☐ | | ☐ | ☐ | ☐ | | |

| Treasurer's Signature | Date Mo./Day/Yr. | Confirming Official's Signature | Date Mo./Day/Yr. | Verifying Official's Signature | Date Mo./Day/Yr. |
|---|---|---|---|---|---|
| | | | | | |

| Income Eligibility | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | Participant Pays Half (1/2) Dues | | | | | Participant Pays Three-Quarters (3/4) Dues | | | | |
| Household Size | Free Yearly | Free Monthly | Free Twice Per Month | Free Bi-Weekly (Every 2 weeks) | Free Weekly | Reduced Price Yearly | Reduced Price Monthly | Reduced Price Twice per month | Reduced Price Bi-Weekly (Every 2 weeks) | Reduced Price Weekly |
| 1 | 20,748 | 1,729 | 865 | 798 | 399 | 29,526 | 2,461 | 1,231 | 1,136 | 568 |
| 2 | 28,132 | 2,345 | 1,173 | 1,082 | 541 | 40,034 | 3,337 | 1,669 | 1,540 | 770 |
| 3 | 35,516 | 2,960 | 1,480 | 1,366 | 683 | 50,542 | 4,212 | 2,106 | 1,944 | 972 |
| 4 | 42,900 | 3,575 | 1,788 | 1,650 | 825 | 61,050 | 5,088 | 2,544 | 2,349 | 1,175 |
| 5 | 50,284 | 4,191 | 2,096 | 1,934 | 967 | 71,558 | 5,964 | 2,982 | 2,753 | 1,377 |
| 6 | 57,668 | 4,806 | 2,403 | 2,218 | 1,109 | 82,066 | 6,839 | 3,420 | 3,157 | 1,579 |
| 7 | 65,052 | 5,421 | 2,711 | 2,502 | 1,251 | 92,574 | 7,715 | 3,858 | 3,561 | 1,781 |
| 8 | 72,436 | 6,037 | 3,019 | 2,786 | 1,393 | 103,082 | 8,591 | 4,296 | 3,965 | 1,983 |
| 9 | 79,820 | 6,653 | 3,327 | 3,070 | 1,535 | 113,590 | 9,467 | 4,734 | 4,370 | 2,186 |
| 10 | 87,204 | 7,269 | 3,635 | 3,354 | 1,677 | 124,098 | 10,343 | 5,172 | 4,775 | 2,389 |
| 11 | 94,588 | 7,885 | 3,943 | 3,638 | 1,819 | 134,606 | 11,219 | 5,610 | 5,180 | 2,592 |
| 12 | 101,972 | 8,501 | 4,251 | 3,922 | 1,961 | 145,114 | 12,095 | 6,048 | 5,585 | 2,795 |
| For Each Additional Household Member Add | 7,384 | 616 | 308 | 284 | 142 | 10,508 | 876 | 438 | 405 | 203 |

Monthly = 12 pays/year; Twice per month = 24 pays/year; Bi-weekly (every 2 weeks) = 26 pays/year; Weekly = 52 pays/year