

Sabre Hockey Association

Lori Maly Fund Assistance Application

We understand that unexpected hardships – such as job loss, illness, divorce, or the death of a loved one – can place a sudden financial burden on families. To ensure that every child has the opportunity to continue playing hockey during difficult times, we are offering assistance with hockey fees for families experiencing temporary hardship. If your family is in need of support, please don't hesitate to submit an application.

The Lori Maly Fund is designed to help families through short-term periods of financial stress caused by hardships, and to offset a portion of a player's fees when funding is available. It is not designed as an annual subsidy. This fund is not intended for families who would otherwise not be capable of financing their children's hockey.

Eligibility

Members not currently in good standing with regard to past due balances or non-compliance with current policies are not eligible for hardship assistance except with approval of the Executive Committee. Players who intend to double roster during the Fall season are ineligible for fee relief. Grants are awarded for the Fall season only.

Assistance will be considered and granted based on the following criteria:

- Availability of Funds
- Special personal circumstances of the parents/guardians
- Financial need of the parents/guardian

Not everyone who applies will be granted assistance. The Lori Maly Fund does not grant awards based on talent. Each player receiving assistance must also demonstrate dedication through consistent attendance at team practices and games and exhibit positive sportsmanship.

Process

Applications should either be submitted via email to LoriMaly@sabrehockey.com or mail to:

PO Box 9512, Naperville, Illinois 60567

Applications are reviewed by the Lori Maly Fund Committee. The applications are directed to the Treasurer. Personal information (names, addresses, phone numbers, etc...) will be removed from the application prior to Committee review. Grant recipients will be notified via email and the assistance will be credited to the skater's fees in Crossbar. All assistance recipient names will remain confidential. Receipt of a grant does not guarantee placement in the hockey program.

Along with the application, the following items should be submitted:

- Copy of the most recent Federal Tax Form (1040), first page only
- Copies of the 2 most recent pay stubs from each parent or guardian. Year to date earnings must be included.

SABRE HOCKEY ASSOCIATION – LORI MALY FUND APPLICATION

Application

Player Name: _____

Birth Date: _____

What program is your child registered
for: _____

Mother/Guardian Information:

Father/Guardian Information:

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Employer: _____

Employer: _____

The above parents/guardians are:

_____ Married to each other

_____ Divorced or legally separated

If divorced or legally separated, which parent has primary
custody? _____

Will non-custodial parent be sharing any cost of the player's
expenses? _____

Number of family members in the
household: _____

List ages of dependents: _____

Has your family experienced an unexpected financial hardship? _____

If yes, please briefly explain: (submit extra sheet if necessary)

Total amount you can pay toward the Fall fees? _____

I will not double roster my child for the season in which a grant is requested _____

Initials

Signature _____

Date _____

Mother/Guardian

Signature _____

Date _____

Father/Guardian