

Fairborn Little League Registration Fee Financial Aid Request Form

Fairborn Little League believes that every child should have the opportunity to play Little League baseball, regardless of their personal financial situation. To request financial assistance with registration fees, please complete this form and send it to fairbornlittleleague@gmail.com

Player Name	Age	Division of Play
Parent/Guardian	Phone #	Email
Address	City	Zip Code
Amount of Financial Aid Request	Will player participate on another team	
(up to \$150 per player)	during the Fairborn Little League	
	Season?	
	☐ No ☐ Yes, sport/team:	
Financial Need Explanation		
Acknowledgement:		
☐ I understand that financial aid funds are limited, and no one is guaranteed financial aid.		
\square I understand that financial aid is for registration fees only.		
\square I understand that I should volunteer for various team or league activities.		
\Box I understand that my child(ren) will not be assigned to a team until my request is approved.		
\Box I certify that the information I have provided is true and I understood the statements above.		
Parent/Guardian Signature	Date	