

Office Use Only

Date:

Approved:

SFXAA FEE WAIVER APPLICATION (Rec Programs Only)

SFXAA generously provides fee waivers for players who would like to participate in our rec programs. Parents, please fill-out the following application.

Player Name:			
Parent Name:			
Address:		City:	Zip:
Phone Number:	Parent Em	ail:	
Parent DOB:	Player DOB:		
Parish:	School:		
Grade:			
I request a fee waiver for t	the following programs (check al	l that apply):	
SFXAA Fall Soccer pr	ogram		
SFXAA Spring Baseba	all & Softball program		
Please provide a brief reas	on for the fee waiver:		
	scholarship waiver must also reg er the Registration tab.		e a family and player profile. Register
By signing below, I certify	that the above information is co	rrect.	
Parent Signature			Date

Please drop off at St. Francis Xavier Parish Office, 4715 N. Central, Phoenix AZ 85012