Financial Assistance Application

A complete application requires <u>all</u> of the following:

- Completed Financial Assistance Application
- Documentation of Financial Need:
    - A copy of the most recently filed Federal Income Tax Return (Form 1040)
    - Documentation showing active participation in a need-based assistance program, such as SNAP, Medicaid, WIC, or Free/Reduced School Meals
- Agreement to Financial Need Terms and Conditions

Additional documentation may be requested by the WAC board if necessary to evaluate an application.

Please complete the following information, one application per child:

Swimmer's Name: _____

Date of Birth: _____ ☐Male ☐Female

Mailing Address: _____

City: _____

State: _____ ZIP: _____

Email Address: _____

Phone Number _____

School Swimmer Attends: _____

Grade: _____ Swimmer lives with: ☐Both Parents ☐Mother

☐Father ☐Other: _____

Scholarship Amount Requested: Full $_____ Partial $_____

Parent/Guardian Information

Total Household Income (Yearly): $ _____

No. of Dependent Children in Household: _____

Financial Assistance Application

Father's Name: _____

Occupation: _____

Home Phone: _____ Work Phone: _____ Email: _____

Mother's Name: _____

Occupation: _____

Home Phone: _____ Work Phone: _____ Email: _____

Guardian's Name: _____

Occupation: _____

Home Phone: _____ Work Phone: _____ Email: _____

You agree to the following conditions:

- Financial assistance is awarded based on demonstrated financial need and the availability of funds. Submission of an application does not guarantee that assistance will be awarded.
- Financial assistance awards are applied towards program fees only
- Recipients remain responsible for all other required expenses and fees not covered by the award
- Families receiving financial assistance are still required to participate in Team Experience volunteer jobs at swim meets their child participates in
- WAC reserves the right to revoke financial assistance at any time if it is discovered an applicant provided false, misleading, or incomplete information during the application process
- Recipients of financial assistance must remain in good standing with WAC per WAC's Codes of Conduct

By accepting financial assistance, the parent/guardian acknowledges and agrees to all terms and conditions outlined above.

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I/We understand that my signature authorizes Williamsburg Aquatic Club to obtain verification of any information on this application and additional information may be necessary for approval of this application. I certify that all of the information on this form is true and correct.

_____ _____

Parent/Guardian Signature Date

Applications and supporting documentation may be submitted by email to treasurer@swimwac.com. Applications are considered on a rolling basis.