



Application for AD Swimming Outreach Grant

PART 1 – Applicant Information	
Athlete Name:	Date of Birth:
A discorded to October Teasure	Basis for Applications
Adirondack Swim Team:	Basis for Application: ☐ Financial Need
Full Name(s) of Parent(s) or Guardian(s):	☐ Other Parent/Guardian Marital Status:
ruli Name(s) of Parent(s) of Guardian(s).	Parenti Guardian Marital Status.
	Single □ Married □
Home Address (Street, City, State, ZIP):	
Phone Number:	Parent E-mail: (to be used for any questions during review)
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PART 2 – Statement of Extenuating Circum	mstance stances, and impact on finances. Attach separate pages, if necessary.
Frovide detailed statement of extendating family circums	stances, ани шираст он штансев. Ашаст верагате рауев, и песевзату.



DART 2 - Statement of Income and Ex	vnonces of Custodial Parents/G	Quardiane	
PART 3 – Statement of Income and Expenses of Custodial Parents/Guardians			
This section is reviewed carefully. Please be as complete and accurate as possible. You should include an			
explanation of any apparent inconsistencies or other information that you feel might help the committee.			
Income Type:	Income Statement Annual	Estimate for Next Year	
- Salary	Ailliuai		
- Bonuses and Commissions			
- Tips			
- Alimony/Child Support			
- Real Estate Income			
- All Other Income*			
Total Income			
Total moomo			
(*) For All Other Income, specify sources including Child Support, Social Security, Medicaid, etc.			
Source	Amount per year	Estimate for next year	
Caro	/ income por your	= timate for next year	
Expense Statement			
Expenses:	Annual	Estimate for next year	
- House payment or rent			
- Utilities			
- Home/auto/life insurance			
- Auto payment, fuel, repairs			
- Medical insurance/bills			
 Other bills, loans, credit cards 			
Total Expenses			
PART 4 – Signature and Statement of Accuracy			
TAIN 4 - Digitature and Statement of Accuracy			
I certify (promise) that all information on this application is true and that all income is reported. I acknowledge that			
AD Swimming is under no obligation to award a grant based upon this application and that the information I have			
provided will be used solely for the purpose of assessing my/our need for financial assistance.			
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Parent/Guardian Date	Parent/Guardian	Date	
If a grant is awarded, notification and check will be sent to your club registrar. Please provide your registrar's name			
and address: Name			
Address			

Instructions for Filing Application:

- 1. Complete all necessary fields above.
- 2. Attach most recent Form 1040 Federal Income Tax return (first two pages only).
- 3. Seal in an envelope and submit to your team registrar, along with your Outreach Membership Application, if not a current member.
- 4. Your Team Registrar will submit the USA Swimming membership application to the AD Registrar and the sealed grant application to the Outreach Coordinator.

Please note that the Outreach Committee will not be responsible for applications that are sent to the wrong address or are otherwise not received. It's advisable to keep a copy of your application.