



**NEW
ENGLAND
SWIMMING**

2025-2026 Outreach Membership Requirements and Qualifications

Club USA Swimming Outreach Membership Procedures:

To qualify for USA Swimming's Outreach membership fee discount (\$7 annual membership fee), Outreach Membership requests and approvals must first go through the individual club. Team Admins, please use the following accepted outreach qualification documentation to verify that a family qualifies for the program. Once approved, send the outreach-specific link from SWIMS to the family for registration. Email office@neswim.com with any questions or requests for special circumstances.

***NEW ***

LSC Outreach Meet Reimbursement Procedures: To receive meet reimbursement benefits from the LSC, outreach documentation must be submitted directly to the LSC office for LSC approval. To request the entry fee reimbursement, the swimmer's coach or other team contact must use the online form (linked [HERE](#)) and submit it to the New England Swimming Office by May 1st for SCY season and by August 15th for LCM season. Reimbursement checks will be made payable to the club and mailed to the appropriate club contact.

All LSC approvals will follow the below criteria and outreach members will receive a bathing suit-and a pair of goggles from New England Swimming.

Submit one of the following documents for Outreach Membership approval

- Social Security Disability Insurance
- Food Stamps
- Temporary Assistance to Needy Families
- Supplemental Security Income
- Women, Infant and Children's Program
- Medicaid
- Children's Health Insurance Plan
- Section 8 Public Housing
- Home Energy Assistance Program\
- Current Federal Income Chart (linked [HERE](#)- and use the Reduced Price Lunch column)

- Alternatively, Use the [annual Federal Income Eligibility Guidelines](#) to verify if a family qualifies for the Outreach Membership using the reduced lunch income.
- The family’s annual income must be at or below the number in the chart based on family size.

Income Eligibility Guidelines
[Effective from July 1, 2025 to June 30, 2026]

Household size	Federal poverty guidelines	Reduced Price Meals—185%				
	Annual	Annual	Monthly	Twice per month	Every two weeks	Weekly
48 Contiguous States, District of Columbia, Guam, and Territories						
1	15,650	28,953	2,413	1,207	1,114	557
2	21,150	39,128	3,261	1,631	1,505	753
3	26,650	49,303	4,109	2,055	1,897	949
4	32,150	59,478	4,957	2,479	2,288	1,144
5	37,650	69,653	5,805	2,903	2,679	1,340
6	43,150	79,828	6,653	3,327	3,071	1,536
7	48,650	90,003	7,501	3,751	3,462	1,731
8	54,150	100,178	8,349	4,175	3,853	1,927
For each add'l family member, add	5,500	10,175	848	424	392	196