



CAC Financial Assistance Description and Application Procedures

This description is taken from CAC's Standard Operating Procedures and Bylaws documents. Specifically, SOP Business Section; Financial Operations – Scholarship, and CAC Bylaws Article II – Membership, Section 6.

Requests for Financial Assistance must be made in writing by submitting a completed CAC Financial Assistance Application Form to the CAC Membership Representative and will be reviewed by said Membership Representative and the President of CAC. Completed Financial Assistance Application Forms are due within 7 days of the start of the season and must include all required paperwork.

Financial Assistance is based on need and is not guaranteed.

Financial Assistance may be given to offset costs of registration fees for a full regular season (Fall, Winter, or Summer). Financial Assistance is not given for December clinics, Spring clinics, conditioning, or USA swimming sessions.

Families receiving Free/Reduced Lunch through the Chelsea School District will be given priority as well as those families receiving Free/Reduced Lunches through neighboring communities. The CAC Financial Assistance Application Form must be accompanied by the letter from the school district stating their family's current participation in the program. The Financial Assistance amount given to families in this program is typically half the regular rate per swimmer, per season, but is not guaranteed.

Families not on the Free/Reduced Lunch Program can make one request per calendar year for Financial Assistance. Financial Assistance amounts for those not in a school district Free/Reduced Lunch Program will not be more than half the regular rate per swimmer for the requested season.

Financial Assistance provided will be set by the CAC Board based on the number of applicants and does not depend on current registration fees. The Financial Assistance amount may change based on the number of applicants and the availability of funds per season. The amount of Financial Assistance available will be maximized to accommodate all requests.

Chelsea Aquatic Club Financial Assistance Application

Application Date:	Documentation Needed by:
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APPLICANT'S INFORMATION:

First Name, Last Name:
Address:
City/Zip:
Contact Telephone:
Email:

I AM REQUESTING FINANCIAL ASSISTANCE FOR:

Child's First Name, Last Name:
Child's age, Child's swim group:
Child's school district:
Does this child participate in school district Free/Reduced Lunch Program?:

Child's First Name, Child's Last Name:
Child's age, Child's swim group:
Child's school district:
Does this child participate in the school district Free/Reduced Lunch Program?

Applicant's Signature:

Date:

OFFICIAL USE ONLY

<i>CAC Membership Rep Signature:</i>	<i>CAC President Signature:</i>	<i>Approval Date:</i>
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