

OUTREACH MEMBERSHIP AFFIDAVIT 2024-2025 Season

Any swimmer providing documentation that demonstrates a family income less than 250% of the federal poverty level will be registered as a USA Swimming outreach athlete member through PNS at no cost to themselves and will qualify for subsidies and offsets provided by PNS. Refer to *PNS AD-17-01* for further information.

Athlete Name:	Club code:
☐ Athlete qualifies for as a <i>Partial Offset Atl</i> I, the undersigned, personally attest I have seen the document household income below 250% of the national poverty level.	nentation checked below as proof of family or
☐ Proof of participating in—or qualifying for—the federa	al <u>reduced</u> hot lunch program
☐ Proof of participating in—or qualifying for—SNAP (for	od stamps)
☐ Proof of participating in—or qualifying for—WIC (Sup	plemental Nutrition for Women, Infants and Children)
☐ Proof of participating in—or qualifying for—FDPIR (Fo	ood Distribution Program on Indian Reservations)
☐ Proof of participating in—or qualifying for—TANF (Temporary Assistance to Needy Families Program)	
☐ Proof of participating in—or qualifying for—Section 8 low income housing	
☐ Proof of participating in—or qualifying for—Washington's Apple Healthcare	
☐ Proof of participating in—or qualifying for—SSI (Supplemental Security Income)	
☐ Proof of participating in—or qualifying for—JOBS (Jo	b Opportunities and Basic Skills)
☐ Proof of participating in—or qualifying for—YMCA/Pa	rks Department low income memberships
☐ Proof of a special situation status (such as foster child	d, homeless, runaway, or migrant)
	\$91,450 (5 persons) \$118,350 (7 persons) \$104,900 (6 persons) \$131,800 (8 persons)
☐ The PNS Diversity and Inclusion Chair has independently approved the athlete as a Partial Offset Athlete.	
☐ Athlete qualifies for as a <i>Full Offset Athlete</i> .	
I, the undersigned, personally attest I have seen the documentation checked below as proof of family or household income below 125% of the national poverty level (select one):	
\square Proof of participating in—or qualifying for—Federal \underline{fr}	<u>ee</u> hot lunch program.
☐ Proof of income (Federal tax return or similar), showin \$18,825 (1 person) \$32,275 (3 persons) \$25,550 (2 persons) \$39,000 (4 persons) For families/households with more than 8 persons	ng total family/household income falling below \$45,725(5 persons) \$59,175 (7 persons) \$52,450 (6 persons) \$65,900 (8 persons) ersons add \$6,425 for each additional person.
$\hfill\Box$ The PNS Diversity and Inclusion Chair has independent	ently approved the athlete as a Full Offset Athlete.
By my signature below, I attest to having seen the documentation as indicated above.	

Printed

Date

Signature