



## Financial Aid Application

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The Seattle Metropolitan Aquatic Club (SMAC) has limited financial resources available for those needing assistance with the costs of swimming registration, monthly fees, meet fees, and swimming equipment.

- **Please review the Financial Aid Overview and Application.**
- The maximum amount of financial aid that can be awarded is 75% of the monthly training fees.
- Financial Aid does not cover travel expenses.
- A copy of your most recent Federal Income Tax filing or approved alternative documentation must be included for your application to be considered.
- A Financial Aid application form must be completed each season to be considered for an award.
- Swimmers must be registered to be guaranteed a place on the team. Receipt of financial aid does not guarantee a spot on the team as we cannot hold spots even for swimmers who have swum in previous seasons. Registration is first come, first served and we are anticipating that all groups will fill up fast this year.
- Applications postmarked after the deadline will only be considered if there are funds remaining after all applications that were submitted on time are considered.

*Please return completed form and all supporting documentation by mail to:*

Seattle Metropolitan Aquatic Club (SMAC)  
Financial Aid PO Box 22564  
Seattle, WA 98122

For additional information and/or questions contact: [office@smac.email](mailto:office@smac.email)



### Personal Information

Email is the standard and primary mode of communication between the Club and families; you **must** provide an active email address where you can be reached. All families receiving Financial Aid are required to have an active email account.

Name of parent or guardian  
requesting financial aid:

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E-mail address:

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Parent or guardian address:

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City, state, zip code:

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Daytime phone:

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Evening phone:

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Cell phone:

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Marital status (single, married,  
divorced, widowed):

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## Swimmer(s)

Complete the information required for each swimmer for which you are applying for financial aid.

- All swimmers listed below can swim across the pool unassisted (check if 'YES')*

Name of **Swimmer1**: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Previous Training Group  
(returning swimmers only): \_\_\_\_\_

Amount requested: \_\_\_\_\_

Swimsuit Size

Please circle one: male or female

If male, please circle one: jammer or brief \_\_\_\_\_

Name of **Swimmer2**: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Previous Training Group  
(returning swimmers only): \_\_\_\_\_

Amount requested: \_\_\_\_\_

Swimsuit Size

Please circle one: male or female

If male, please circle one: jammer or brief \_\_\_\_\_

Name of **Swimmer3**: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Previous Training Group  
(returning swimmers only): \_\_\_\_\_

Amount requested: \_\_\_\_\_

Swimsuit Size

Please circle one: male or female

If male, please circle one: jammer or brief \_\_\_\_\_



Name of Swimmer4: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Previous Training Group  
(returning swimmers only): \_\_\_\_\_

Amount requested: \_\_\_\_\_

Swimsuit Size \_\_\_\_\_

Please circle one: male or female

If male, please circle one: jammer or  
brief \_\_\_\_\_



## Income Verification

Please provide the following income information.

Child support: \$ \_\_\_\_\_

Current monthly household income: \$ \_\_\_\_\_

Do your swimmers qualify for free/reduced lunch (yes or no): \_\_\_\_\_

Each parent or guardian must provide a copy of their most recent Federal income tax filing or alternative documentation. If you qualify for Free/Reduced Lunch, you may qualify for additional financial support from Pacific Northwest Swimming.

To be considered for an award of up to 75% of monthly fees, each parent or guardian must provide a copy of their 2022 recent Federal income tax filing or proof of participating in or qualifying for the Federal Free hot lunch program.

To be considered for a partial award of less than 75% of monthly fees, each parent or guardian must provide a copy of their 2022 recent Federal income tax filing or proof of participating in or qualifying for one of the following:

- the federal reduced hot lunch program
- SNAP (food stamps)
- WIC (Supplemental Nutrition for Women, Infants and Children)
- TANF (Temporary Assistance to Needy Families Program)
- Section 8 low-income housing
- Washington's Apple Healthcare
- SSI (Supplemental Security Income)
- JOBS (Job Opportunities and Basic Skills)
- YMCA/Parks Department low-income memberships
- a special situation status (such as foster child, homeless, runaway, or migrant)



### **Narrative**

Why do you need financial aid? (use backside if needed)

Why does your child want to swim for SMAC? (use backside if needed)

### **Certification**

By submitting this application:

I/we recognize that this information can be shared with members of the SMAC Financial Aid Committee, SMAC Board Members, SMAC Coaches, and individuals responsible for the distribution of financial aid benefits (including gear distribution volunteer and or site parent representative).

I/we agree that if our financial need is reduced, we will promptly notify the Financial Aid Committee and understand the amount of our financial aid may change.

I/we agree to pay all remaining balances not covered by financial aid in accordance with SMAC policies.

I certify that to the best of my knowledge the information provided is correct.

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Parent or guardian signature

Date