2025-2026 Season Financial Aid Application Form

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 2025-2026 Financial Aid Overview and Application Form.**
- 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

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: _____

E-mail address: _____

Parent or guardian address: _____

City, state, zip code: _____

Daytime phone: _____

Evening phone: _____

Cell phone: _____

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

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 2024 or most 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 2024 or most 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.

_____

Parent or guardian signature Date