



PART 3 – Statement of Income and Expenses of Custodial Parents/Guardians

This section is reviewed carefully. Please be as complete and accurate as possible. You should include an explanation of any apparent inconsistencies or other information that you feel might help the committee.

| | Income Statement | Estimate for Next Year |
|---------------------------|------------------|------------------------|
| Income Type: | Annual | |
| - Salary | | |
| - Bonuses and Commissions | | |
| - Tips | | |
| - Alimony/Child Support | | |
| - Real Estate Income | | |
| - All Other Income* | | |
| Total Income | | |

(*) For All Other Income, specify sources including Child Support, Social Security, Medicaid, etc.

| Source | Amount per year | Estimate for next year |
|--------|-----------------|------------------------|
| | | |
| | | |
| | | |
| | | |

| | Expense Statement | |
|------------------------------------|-------------------|------------------------|
| Expenses: | Annual | Estimate for next year |
| - House payment or rent | | |
| - Utilities | | |
| - Home/auto/life insurance | | |
| - Auto payment, fuel, repairs | | |
| - Medical insurance/bills | | |
| - Other bills, loans, credit cards | | |
| Total Expenses | | |

PART 4 – Signature and Statement of Accuracy

I certify (promise) that all information on this application is true and that all income is reported. I acknowledge that AD Swimming is under no obligation to award a grant based upon this application and that the information I have provided will be used solely for the purpose of assessing my/our need for financial assistance.

Parent/Guardian Date Parent/Guardian Date

If a grant is awarded, notification and check will be sent to your club registrar. Please provide your registrar's name and address: Name _____

Address _____

Instructions for Filing Application:

1. Complete all necessary fields above.
2. Attach most recent Form 1040 Federal Income Tax return (first two pages only).
3. Seal in an envelope and submit to your team registrar, along with your Outreach Membership Application, if not a current member.
4. Your Team Registrar will submit the USA Swimming membership application to the AD Registrar and the sealed grant application to the Outreach Coordinator: Sean Caron, 17 Vienna Court, Burnt Hills, NY 12027

Please note that the Outreach Committee will not be responsible for applications that are sent to the wrong address or are otherwise not received. It's advisable to keep a copy of your application.