

## **New England Swimming Outreach Membership Policy**

USA Swimming and New England Swimming offer a membership program to help and encourage the economically disadvantaged youth who are unable to afford the USA Swimming membership fees. The program offers qualified athletes the opportunity to become USA Swimming members for \$5.00. The goal of the Outreach Program is to promote the identification, recruitment, training and retention of any of America's minority and disadvantaged youth that shows an interest in swimming and is unable to afford joining a local USA Swimming club.

The membership is a one year membership. Confidentiality of members will be maintained and the athlete will receive a membership card as with any other year-round athlete.

Proof of qualification for Outreach Membership can be shown by meeting the following criteria or other circumstances as approved by the Outreach Committee:

- Copy of a current reduced/free lunch letter
- Section A or B below

### **To apply for Outreach Membership:**

1. Complete the NES Outreach Athlete Registration form.
2. Submit the form, \$5.00 registration fee and proof of qualification to your club Registrar (if you are a member of a club). If you are unattached, send it to the NES office. (verification must be sent annually)
3. NE Swimming reimburses meet fees for **NE calendar meets**. Submit request at the end of each season. The payment goes directly to the club (unless an unattached swimmer)

Please contact

Carol Healey, LSC Registrar

PO Box 920133

Needham, MA 02492

(phone) 781-449-0270

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# New England Swimming Athlete Outreach Application

New England and USA Swimming offer a reduced registration fee for athletes from low-income families. The purpose of this program is to provide competitive swimming opportunities to the underrepresented and economically disadvantaged youth in the United States. The Outreach Program reduces the annual membership fee an athlete pays to \$5.00. Complete the Athlete Information section and either Section A-Proof of Income or Section B-Proof of Assistance and submit with the required documentation and membership application.

*New England Swimming Office, PO Box 920133, Needham, MA 02492*

Athlete Information				
Date: _____ Athlete's Registration ID#: _____				
Name of Club: _____ Club Code: _____ LSC: _____				
Athlete's Legal Name: _____				
Last Name	First Name	Middle Initial	Preferred Name	
Athlete's Birth date: _____				
Month	Day	Year		
Athlete's Current Address: _____				
Address and Street		City	State	Zip Code
Home Phone Number: _____ - _____				
Signature of Parent or Guardian: _____			Date _____	

Section A: Proof of Income	
Attach a photocopy of your most recent, signed, Federal tax return, proving that your income is below the level in the following table. <small>[source: USA Child Nutrition eligibility guidelines]</small>	Gross Yearly Income
Number in Family	
2	\$29,637
3	\$37,296
4	\$44,955
5	\$52,614
6	\$60,273
7	\$67,951
8	\$75,647
Over 8, add for each	\$ 7,696

Section B: Proof of Assistance
Attach a photocopy of an approved application for one of the following assistance programs

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| <input type="checkbox"/> Aid to Families with Dependent Children<br><input type="checkbox"/> Social Security Disability Insurance<br><input type="checkbox"/> Food Stamps<br><input type="checkbox"/> Temporary Assistance to Needy Families | <input type="checkbox"/> Supplemental Security Income<br><input type="checkbox"/> Women, Infant and Children's Program<br><input type="checkbox"/> Medicaid<br><input type="checkbox"/> Children's Health Insurance Plan | <input type="checkbox"/> Section 8 Public Housing<br><input type="checkbox"/> Home Energy Assistance Program<br><input type="checkbox"/> Other<br><input type="checkbox"/> Free/Reduced School Lunch |
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