

Scholarship Application

MAC is pleased to be able to offer scholarships.

 All information provided will be held in strict confidence.

Scholarship applications can be filled out any time during the swim season which is September-August.

**Please note a new application must be filled out each year by September 1 to be considered.**

In order to accommodate as many families as possible, MAC rewards up to 50% of monthly swim dues.

~Monthly dues are paid in advance. The scholarship dollars awarded will be applied to your account only after you pay your part of the dues.

**~*Families awarded scholarship are expected to volunteer their time as much as possible to the team*.**

*~****Families awarded scholarship are expected to attend at least 70% of practices.***

~Please feel free to contact the board President if there are any issues affecting your family’s ability to pay your part of the dues. Communication is key and we want to make this a positive process.

Date of application:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Swimmer(s) name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents/Guardians:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Swimmer Squad (Please circle)**

Senior National-$165/month Senior Sectional-$135/month

Senior State-$125/month Gold-$105/month

Silver-$85/month Bronze-$70/month

Pre-Bronze-$30/month

Please share any information that will be helpful for the MAC Board to consider you for a scholarship:

In what ways are you volunteering for MAC? If not currently volunteering, do you feel you can actively volunteer for MAC?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Board approval date

PLEASE GIVE TO BOARD PRESIDENT OR MAIL TO MAC P.O. BOX 7434, MISSOULA, 59807