

Red Wing Swim Club Application for Membership Scholarship

This is a scholarship application for membership in Red Wing Swim Club. This application may cover partial membership fees only. Minnesota Swimming Inc. insurance fees and splash fees are not covered under this scholarship application and will be the responsibility of the member.

All items below must be completed to be considered for scholarship reimbursement.

Name of Swimmer: _____

Parents : _____

Address: _____

Phone: _____

Email: _____

Does your household receive Food Stamps, MFIP or FDPRI? YES NO

Does your household meet the income maximum outlined below? YES NO

If yes, circle the line describing your household income.

Household Size	\$ Per Year	\$ Per Month	\$ Twice Per Month	\$ Per 2 Weeks	\$ Per Week
1	20,036	1,670	835	771	386
2	26,955	2,247	1,124	1,037	519
3	33,874	2,823	1,412	1,303	652
4	40,793	3,400	1,700	1,569	785
5	47,712	3,976	1,988	1,836	918
6	54,631	4,553	2,277	2,102	1,051
7	61,550	5,130	2,565	2,368	1,184
8	68,469	5,706	2,853	2,634	1,317
For each additional household member add:	6,919	577	289	267	134

Attach proof of income (tax statement or recent paycheck stubs)

Explain any other pertinent reasons or hardship to be considered in the application scholarship process:

All information received will be kept private and confidential.

Signature of parent _____ Date _____

Submit application to:

RWSC Scholarship Committee
PO Box 199
Red Wing, MN 55066

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