

Niagara District Outreach Program

- X Niagara District will waive the registration fee for swimmers who can demonstrate proof of financial need.
- X You must still pay \$5.00 for USA Swimming Insurance.
- X Complete this form, and return it with your USA Swimming Registration Form.
- X You may demonstrate proof of need by completing either Section A or Section B.

Section A: Proof of Income

Attach a photocopy of your pay stub or completed income tax form, proving that your income is below the level indicated on the table:

Number in Family	Gross Yearly Income	Gross Monthly Income	Hourly Income
2	\$16,875	\$1,407	\$8.12
3	\$21,225	\$1,769	\$10.20
4	\$25,575	\$2,132	\$12.30
5	\$29,925	\$2,495	\$14.39
6	\$34,275	\$2,856	\$16.49
7	\$38,625	\$3,219	\$18.57
8	\$42,825	\$3,582	\$20.66
Over 8: Add for each child	+\$4,350	+\$363	+\$2.09

Number of people in your family: _____

Income: _____ Check one: [] Yearly [] Monthly [] Hourly

Section B: Proof of Eligibility for Other Assistance Program

Attach a photocopy of an approved application for one of the following programs:
(please check one)

- [] AFDC
- [] JOBS
- [] Emergency Assistance
- [] TANF
- [] SSDI / SSI
- [] WIC
- [] Medicaid
- [] CHIP
- [] Food Stamps
- [] HEAP
- [] Free or Reduced Price School Lunch
- [] Section 8
- [] Other _____

Swimmers Full Name: _____

Parents Name: _____

Address: _____

Team: _____

Signature :

Date:

Questions? Marty Keating
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