ELGIN AQUATICS ASSOCATION–AGE GROUP SCHOLARSHIP Rev: 11/2008

STEP 1 - To Be Completed by the Applicant Family PLEASE PRINT INFORMATION

PARENT/GUARDIAN INFORMATION

_____
First and Last Name

_____
Street Address

_____
City, State and Zip

SCHOLARSHIP RECIPIENT INFORMATION

_____
First and Last Name

_____
Swim Team Name

_____ _____
Age **Date of Birth**

BRIEF STATEMENT OF REQUEST/NEED

AMOUNT REQUESTED: _____

_____

_____

_____

PARENT/GUARDIAN APPROVAL and INITIALS/SIGNATURE

Initial

[____] – **I/We understand that the EAA Age-Group Scholarship is a MATCHING Scholarship that provides additional funding up to a maximum of what the Team/Organization has already provided. Actual amount provided is based upon availability of EAA funds and operates on a first-come, first-serve basis.**

[____] – **I/We grant permission to the swim team/organization identified below to provide information and confirmation of family and recipient need and/or eligibility for EAA financial assistance.**

[____] – **I/We understand that Elgin Aquatics Association membership and participation in Elgin Aquatics Association fundraisers will be required with grant of scholarship and that all funds raised in conjunction with EAA-sponsored projects/programs are solely in the name of EAA and NOT in the name of an individual or organization with which the fundraiser is associated.**

_____ ____ /____ /_____
Parent/Guardian Signature **MM DD YYYY**

**** DELIVER SCHOLARSHIP APPLICATION TO SWIM TEAM MANAGEMENT/COACH ****

STEP 2 - To Be Completed by the Swim Team Manager or Coach

_____
Manager/Coach Name (Please Print)

_____
Contact Phone Number

EAA provides SECONDARY scholarship funding. PLEASE COMPLETE THE FOLLOWING STATEMENT:

My Team/Organization has reviewed, approved and processed a financially-based scholarship for the family and swimmer stated above. This scholarship is in the AMOUNT OF: _____

SWIM TEAM MANAGEMENT or COACH SIGNATURE

_____ ____ /____ /_____
Swim Team Manager/Coach Signature **MM DD YYYY**

STEP 3 - Return Completed Scholarship Application To:

Elgin Aquatics Association, 13N338 Chisholm, Elgin Illinois, 60124

========== Do Not Write Below This Area…EAA Use Only ==========

Received: ____/____/_____ Disposition: _____

Reviewed: ____/____/_____ _____