

Total number in household: _____

Are you single head of household? ___yes ___no

Let us know how rowing has influenced and benefited your child(ren)

Please fill in your MONTHLY income and expenses BEFORE TAXES

Wages/Salaries/Tips Before Taxes for YOU	\$	Rent/mortgage	\$
Wages/Salaries/Tips Before Taxes for Significant Other	\$	Utilities (electric/cable/phone)	\$
Unemployment Compensation	\$	Credit Card Payments	\$
Social Security Compensation	\$	Clothing	\$
Child Support/other child aid	\$	Car Insurance	\$
401K/retirement funds	\$	Food	\$
Alimony	\$	Homeowners/Rental Insurance	\$
		Alimony	\$
		Medical Insurance/Fees	\$
		Loans	\$
Other ** Please Explain	\$	Other ** Please Explain	\$
Total Income:		Total Expenses:	

**Please explain other: _____

Attach last year's internal revenue tax statement & current (1 month's) pay stubs and/or your SSI allocation statement for you and significant other to verify annual earnings.

Selection Process

Financial assistance eligibility is ultimately the responsibility of the R.A.P. committee of the Saratoga Rowing Association. It is a completely confidential (non parental committee). Financial assistance determination is based on a review of the application and will be granted to the extent that funds are available. The SRA reserves the right to refuse assistance to any applicant.

All information contained in this application is deemed true to the best of my knowledge:

Signature of applicant _____ date _____