



4) Provide information for all applicants.

**MEMBERSHIP INFORMATION:**

Adult/Youth or Head of Family: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

If Family Membership, please complete the following;

(Note: All members must reside in the same household in order to qualify for Family Membership)

2<sup>nd</sup> Adult: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

1<sup>st</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

2<sup>nd</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

3<sup>rd</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

4<sup>th</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

5<sup>th</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

6<sup>th</sup> Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Town: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

**5) Please attach a copy of your most recent year's Federal tax return form 1040 for all wage earners. Applications without a copy of form 1040 will not be considered for award.**

6) Are you also interested in a swim lesson scholarship?      Yes      No

All membership scholarship applications are reviewed and final determination is made by the Whitin Community Center's Scholarship Committee. The amount of money available for such scholarships each year is dependent upon money raised through donations, grants and fundraising events. Scholarship applications (this form plus required tax documentation), will be reviewed and awarded on a first come, first serve basis. Any financial assistance awarded will not be retroactive. Please allow up to 4 weeks for review. All applicants will be notified of the final decision. If you have any scholarship questions, please contact Finance@OurGym.org.

7) We certify that the information presented within is true and correct to the best of our knowledge.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date