

Financial Aid Family Agreement

We are applying for financial assistance from the Evergreen Swim Team. In doing so, we agree to the following terms and conditions:

_____ We understand that if our swimmer receives financial assistance, he or she agrees to swim ***only*** with the Hurricanes for the remainder of the entire season in which aid is provided. The only exception to this rule is for High School swimming, during which time our child may swim for both the Hurricanes and his or her high school team.

_____ We understand that if our swimmer becomes injured or quits the team during the season in which aid is provided, that we will be required to re-pay the team for any unused portion of the money awarded to us.

_____ We realize that we will be required to work at each home swim meet during the season in which aid is provided. As well, we may also be asked to assist with other volunteer jobs outside of swim meets, as deemed necessary for the overall success of the team. Volunteerism is our responsibility, and not our swimmer's.

_____ We have paid the annual family fees of \$335. (Please include check number and date, or indicate payment was provided through a credit card).

Payment Information for 2008/09 Family Fee: _____

Signature of Parent(s) of Applicant

Date