



# Application for Financial Assistance

The Capital Crew Boosters Club asks each rower to contribute dues to pay for food, travel, expenses, equipment and boats to benefit all rowers of Capital Crew. Rowers that may need assistance may complete and submit this application along with supporting documentation. Financial assistance is given based on proven need and the applicant's willingness to contribute to and support Capital Crew events, including the "Ergathon."

The Capital Crew Board of Directors will review all applications in a closed session and will keep the identities of the applicants and all information submitted with the application (such as W-2 form without SS #, letter of explanation, etc.) confidential. Any confidential information submitted with the application will be shredded.

(Please print all information)

Rower's Name: \_\_\_\_\_ Team: VM \_\_\_\_\_ VW \_\_\_\_\_ NM \_\_\_\_\_ NW \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parents' Phone Numbers: \_\_\_\_\_

### Financial Assistance Request (place amount requested next to the item)

- |                                  |                               |
|----------------------------------|-------------------------------|
| _____ Fall Aquatic Center Fees   | _____ Regatta Travel Expenses |
| _____ Spring Aquatic Center Fees | _____ Fall Booster Dues       |
| _____ Spring Booster Dues        | _____ National Championships  |

Amount I can pay: weekly \_\_\_\_\_ monthly \_\_\_\_\_ yearly \_\_\_\_\_

Signature of Rower: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail this completed form, along with any supporting documents you wish the board to consider in support of your request for financial assistance to: **President of Capital Crew Boosters Club, P.O. Box 2031, Fair Oaks, CA 95628**

(Do not write below this line)

**Financial Assistance Determination:** On \_\_\_\_\_, the board of directors met and decided:

Amount Granted: \_\_\_\_\_

\_\_\_\_\_  
President Signature

\_\_\_\_\_  
Date