



## ESSEX ROWING

PO Box 81  
North Andover, MA 01845  
Office: 978.208.4617 Fax: 978.208.4618  
[www.essexrowing.org](http://www.essexrowing.org)

### ESSEX ROWING CLUB, INC. APPLICATION FOR FINANCIAL ASSISTANCE

Essex Rowing is committed to making rowing accessible to student-athletes from all backgrounds, regardless of financial means. We are able to accomplish this goal by bridging the gap between what a family can afford and the actual cost of a competitive season for qualifying participants. We understand the difficulty in financing a rowing season and the associated travel and competitive fees, and will do all that we can to help make this athletic opportunity possible. Aid is awarded without regard to race, color, or national or ethnic origin, and without regard for gender, sexual orientation, creed, or scholastic affiliation. Consequently, Essex Rowing is proud to have awarded \$133,000 in financial aid to athletes since the organization's inception in November 2006.

To assist us with processing your request, please complete the form below. All applications are considered confidential and will be reviewed only by those responsible for determining assistance levels. These decisions will be made based on demonstrated need and any other appropriate considerations. Applicants are expected to work in good faith with the organization to determine the most appropriate level of aid, which may fall anywhere in the range of partial to full assistance.

Athlete's Name \_\_\_\_\_

Program for which you are requesting aid \_\_\_\_\_

This request is for (circle one) Full / Partial aid. If partial, note the amount requested \_\_\_\_\_

Rower's address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Occupation of Mother/Guardian \_\_\_\_\_

Occupation of Father/2<sup>nd</sup> Guardian \_\_\_\_\_

Annual Income of Mother/Guardian \_\_\_\_\_ Annual Income of Father/2<sup>nd</sup> Guardian \_\_\_\_\_

Number of other children (under age 18) in household \_\_\_\_\_

- Please submit a written statement of need on a separate sheet of paper. This is your opportunity to provide information pertinent to the decision which may not be covered in the form above.
- Please submit any documentation related to assistance given by other organizations. This may include free/reduced lunch, school athletic waivers, scholarships, etc.
- Please attach a copy of the page of your Federal Income Tax that shows your taxable income for the year (usually the first page). If each parent/guardian filed separately, provide this page for both returns.

Signature of Mother or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Father or 2<sup>nd</sup> Guardian \_\_\_\_\_ Date \_\_\_\_\_

Send this completed form with appropriate supporting documentation to:

Essex Rowing Club, Inc.  
PO Box 81  
North Andover, MA 01844