



Indy Parks and Recreation

Swim Programs Financial Aid Application - 2023

(Swim Lessons, Swim Team & Junior Lifeguard)

For all Applicants:

The Indy Parks and Recreation summer aquatic Swim Program Financial Aid is designed for Marion County residents & families seeking assistance with the registration cost for your youth swimmers. **Here are the steps you must complete before your application will be processed.**

- **1st Step – Register your child(dren) for the program.** Swim registration must be completed by calling Customer Service at 327-327-PARK (7275) option #2.
- **2nd Step - A \$5.00 non-refundable deposit must be made for each swim program you wish your child to attend. If this step is not completed, your application will be denied.** If funds are no longer available your \$5.00 deposit will be refunded.
- **3rd Step –** Complete this Swim Program Financial Aid Application and **MAIL** (using United States Postal Service/USPS) it with all required financial documents requested. The application must be turned in at least two weeks before the first day of class.
- **4th Step –** Indy Parks will process applications and award financial aid on a first-come, first-serve basis. You will be notified in writing with electronic communication within two weeks of receipt of your application.

NOTE: Financial Aid is awarded based on financial need only. If you have already qualified for financial aid through the Indy Parks summer camp program, you are already qualified to receive swim program financial aid; please contact the Indy Parks financial aid office at the address below to verify your status.

2023 Scholarship Eligibility Monthly Income Chart

(before deductions)

Household Size	2	3	4	5	6	7	8
50% Fee Waived	\$ 2,823	\$ 3,551	\$ 4,279	\$ 5,006	\$ 5,734	\$ 6,462	\$ 7,189
75% Fee Waived	\$ 2,404	\$ 3,023	\$ 3,643	\$ 4,262	\$ 4,882	\$ 5,502	\$ 6,121
100% Fee Waived	\$ 1,984	\$ 2,495	\$ 3,007	\$ 3,518	\$ 4,029	\$ 4,541	\$ 5,052

Note: Financial Aid is awarded based on financial need only. Financial Aid may range from 50% - 100%. (This will not include the deposits)

If you decide not to attend the swim program you registered for, you will not be refunded your deposit. You must notify (in writing) the park manager by Wednesday at 6 p.m. the week prior to the start of the program. Failure to comply will result in a withdrawal from any remaining swim programs and your deposit will not be refunded.

Scholarships are for Marion County residents only.

Attached is the financial aid application. The application is a one-time assistance for Indy Parks and Recreation’s swim programs. The application must be completed with all pertinent information to be valid. We will hold onto your application if any information is missing and will not be able to process it until the missing information is provided.

Applications will be considered as long as funds and swim program registration space is available. **You are encouraged to apply early since space and financial aid are limited.**

**Indy Parks and Recreation Customer Service
Aquatic Financial Aid Program
1720 Burdsal Parkway
Indianapolis, IN 46208**



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CONFIDENTIAL – all information must be completed

Parent/Guardian Name (#1): _____ **Phone Number:** _____

Home Address: _____
Street City State Zip

Email: _____

Place of Employment: _____ **Work Phone Number:**

Parent/Guardian Name (#2): _____ **Phone Number:**

Home Address: _____
Street City State Zip

Email: _____

Place of Employment: _____ **Work Phone Number:**

List all living in the household (including adults):

CHECK BOXES OF YOUTH REQUESTING SCHOLARSHIPS

	Name (First/Last)	Age	Sex	SS#
1.	<input type="checkbox"/>	_____	_____	_____
2.	<input type="checkbox"/>	_____	_____	_____
3.	<input type="checkbox"/>	_____	_____	_____
4.	<input type="checkbox"/>	_____	_____	_____
5.	<input type="checkbox"/>	_____	_____	_____
6.	<input type="checkbox"/>	_____	_____	_____

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REGISTRATION CODES, WEEKS & NAMES YOU ARE APPLYING FOR:

Note - Not all weeks are available at every location. Refer to the camp guide. Include additional children requesting scholarships on separate piece of paper or on the back of this form.

REGISTRATION CODE(S): _____ 1st CHILD'S NAME: _____ PARK(S) _____

Check Week(s):

- | | | | | |
|--------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> 5/30-6/2 | <input type="checkbox"/> 6/5-6/9 | <input type="checkbox"/> 6/12-6/6 | <input type="checkbox"/> 6/20-6/23 | <input type="checkbox"/> 6/26-6/30 |
| <input type="checkbox"/> 7/3,7/5-7/7 | <input type="checkbox"/> 7/10-7/14 | <input type="checkbox"/> 7/17/7/21 | <input type="checkbox"/> 7/24-7/28 | |

REGISTRATION CODE(S): _____ 2nd CHILD'S NAME: _____ PARK(S) _____

Check Week(s):

- | | | | | |
|---|------------------------------------|------------------------------------|------------------------------------|--------------------------------|
| <input type="checkbox"/> 5/30-6/2
6/30 | <input type="checkbox"/> 6/5-6/9 | <input type="checkbox"/> 6/12-6/6 | <input type="checkbox"/> 6/20-6/23 | <input type="checkbox"/> 6/26- |
| <input type="checkbox"/> 7/3,7/5-7/7 | <input type="checkbox"/> 7/10-7/14 | <input type="checkbox"/> 7/17/7/21 | <input type="checkbox"/> 7/24-7/28 | |

The information you furnish to Indy Parks is exempt from disclosure as a public record by Indiana Code [IC 5-14-3-4(a) (5)]. You should mark "CONFIDENTIAL" on the documents you submit. Please mail your application with requested documentation to:

CONFIDENTIAL

Parent/Guardian Name (#1): _____
Home Number Work Number

Home Address: _____
Street City State Zip

Place of Employment: _____

Spouse (if married): _____
Home Number Work Number

If different from above: _____
Street City State Zip

Place of Employment: _____

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Aquatic Financial Aid Program
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List all living in the household (including other adults):

CHECK BOXES OF YOUTH REQUESTING FINANCIAL AID

		Name (First/Last)	Age	Sex	SS#
1.	<input type="checkbox"/>	_____			
2.	<input type="checkbox"/>	_____			
3.	<input type="checkbox"/>	_____			
4.	<input type="checkbox"/>	_____			
5.	<input type="checkbox"/>	_____			
6.	<input type="checkbox"/>	_____			
7.	<input type="checkbox"/>	_____			

SWIM PROGRAM(S), REGISTRATION CODES, & NAMES YOU ARE APPLYING FOR:

PROGRAM: _____	REGISTRATION CODE: _____	CHILD'S NAME: _____
PROGRAM: _____	REGISTRATION CODE: _____	CHILD'S NAME: _____
PROGRAM: _____	REGISTRATION CODE: _____	CHILD'S NAME: _____
PROGRAM: _____	REGISTRATION CODE: _____	CHILD'S NAME: _____
PROGRAM: _____	REGISTRATION CODE: _____	CHILD'S NAME: _____

PARK NAME _____

CONFIDENTIAL

Why did you choose Indy Parks? (Please Check Appropriate Responses):

Affordability Accessibility Only Program in School Quality of Programs Other (please explain) _____

Gross Family Income: Monthly	(Requester #1)	(Other Earner#2)
Employment-wages-pension	\$ _____	\$ _____
Investment/Interest	\$ _____	\$ _____
Child Support	\$ _____	\$ _____
Alimony	\$ _____	\$ _____

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Maintenance & Support	\$ _____	\$ _____
Other	\$ _____	\$ _____

Government Assistance: Monthly	(Requester #1)	(Other Earner#2)
Unemployment	\$ _____	\$ _____
Public Assistance	\$ _____	\$ _____
Disability/Social Security	\$ _____	\$ _____
Other	\$ _____	\$ _____

You must attach the following marked "CONFIDENTIAL" to verify the above information:

- Two (2) Current Payroll Check Stubs
- Latest Federal Tax Return
- Written Proof of other income sources listed above.

Indy Parks and Recreation considers these documents confidential records pursuant to INDIANA Code 5-14-3-4 (a)(5).

I certify and affirm that the above information is true and complete to the best of my knowledge. I agree to inform Indy Parks and Recreation of any changes in my income or family size. I understand that false or incomplete information could jeopardize eligibility for financial assistance.

Signature of Requester: _____ **Date:** _____

Return Application to:
 Indy Parks and Recreation
 Aquatic Financial Aid Program
 200 East Washington Street, Suite 2301
 Indianapolis, IN 46204

Indy Parks and Recreation Customer Service
Aquatic Financial Aid Program
1720 Burdsal Parkway
Indianapolis, IN 46208