

OUTREACH MEMBERSHIP AFFIDAVIT 2025-2026 Season

Any swimmer providing documentation that demonstrates a family income less than 250% of the federal poverty level will be registered as a USA Swimming outreach athlete member through PNS at no cost to themselves and will qualify for subsidies and offsets provided by PNS. Refer to *PNS AD-17-01* for further information.

Athlete Name:	Club code:
□ Athlete qualifies for as a <i>Partial Offset Athlete</i> .	
I, the undersigned, personally attest I have seen the documentation chechousehold income below 250% of the national poverty level (select one):	sked below as proof of family or
$\ \square$ Proof of participating in—or qualifying for—the federal $\underline{reduced}$ hot	lunch program
☐ Proof of participating in—or qualifying for—SNAP (food stamps)	
☐ Proof of participating in—or qualifying for—WIC (Supplemental Nuti	rition for Women, Infants and Children)
☐ Proof of participating in—or qualifying for—FDPIR (Food Distributio	n Program on Indian Reservations)
☐ Proof of participating in—or qualifying for—TANF (Temporary Assist	tance to Needy Families Program)
☐ Proof of participating in—or qualifying for—Section 8 low income housing	
☐ Proof of participating in—or qualifying for—Washington's Apple Hea	althcare
☐ Proof of participating in—or qualifying for—SSI (Supplemental Secu	urity Income)
☐ Proof of participating in—or qualifying for—JOBS (Job Opportunities	s and Basic Skills)
☐ Proof of participating in—or qualifying for—YMCA/Parks Departmer	nt low income memberships
☐ Proof of a special situation status (such as foster child, homeless, re	unaway, or migrant)
☐ Proof of income (Federal tax return or similar), showing total family/ \$39,125 (1 person) \$66,625 (3 persons) \$94,125 (5 pers \$52,875 (2 persons) \$80,375 (4 persons) \$107,875 (6 persons) for families/households with more than 8 persons add \$13,75	ons) \$121,625 (7 persons) rsons) \$135,375 (8 persons)
$\hfill \square$ The PNS Diversity and Inclusion Chair has independently approved	I the athlete as a Partial Offset Athlete.
☐ Athlete qualifies for as a <i>Full Offset Athlete</i> .	
I, the undersigned, personally attest I have seen the documentation household income below 125% of the national poverty level (select one):	
$\ \square$ Proof of participating in—or qualifying for—Federal <u>free</u> hot lunch p	rogram.
☐ Proof of income (Federal tax return or similar), showing total family/ \$19,562 (1 person) \$33,312.50 (3 persons) \$47,062.50 (5 pe \$26,437.50 (2 persons) \$40,187.50 (4 persons) \$53,937.50 (For families/households with more than 8 persons add \$6,87	ersons) \$60,812.50 (7 persons) (6 persons) \$67,687.50 (8 persons)
$\hfill \square$ The PNS Diversity and Inclusion Chair has independently approved	I the athlete as a Full Offset Athlete.
By my signature below, I attest to having seen the documentation as indicated above.	

Printed

Date

Signature