



## Survival Swimming Scholarship Application

Dear Parent/Guardian,

Providing children access to a vital skill like survival swimming can be financially challenging, yet the need for these lessons is critical in combatting the leading cause of death of children ages 1-4 years of age. Lifesaver Aquatics is honored to partner with First 5 Riverside County in their mission to help prevent drowning. In collaboration First 5 Riverside County is generously providing 30 families with funding for children ages 5 years of age and under with financial assistance in an effort to make swimming lessons more accessible. Lifesaver Aquatics in Murrieta, California will provide those who are income qualified with survival swimming lessons.

Please complete, sign, and return the confidential Survival Swimming Scholarship Application as soon as possible. Once we receive your form, if eligible for the scholarship you will be contacted with a promotional code, which will allow you to register eligible children for one session of swimming lessons for free. Please contact 951-460-0024 if you have questions or need assistance in completing this form.

Please complete the attached form and return it via email to [swim@lifesaveraquatics.com](mailto:swim@lifesaveraquatics.com) with the subject line - Scholarship Application or mail it to Lifesaver Aquatics at 39614 Tamarisk St. Murrieta, CA. 92563.

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Please print or type

### **Family Information**

Parent/Guardian Name: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

email address: \_\_\_\_\_

Number of Children in family \_\_\_\_\_

Number of related persons living in household \_\_\_\_\_

Primary Language spoken at home (check all that apply)

English  Spanish  Vietnamese  Korean

\_\_Mandarin\_\_Cantonese\_\_Other

Ethnicity: \_\_\_\_\_

### Swimmer Information

Please include all children you plan to register for survival swimming lessons (regardless of age if you are willing to cover the cost of children ages 6 years and up. Qualifying children must be age 5 or under.

Child's Name	Date of Birth	Child's Name	Date of Birth
1.		5.	
2.		6.	
3.		7.	
4.		8.	

### ELIGIBILITY

*Applicants qualify for the scholarship if one of the following applies. Please check at least one.*

<b>CalWorks</b>	
<b>CalFresh</b>	
<b>Medi-Cal</b>	
<b>WIC</b>	
<b>Quality Start Riverside County CAPP/RHAP</b>	
<b>Foster Care Guardian/Family</b>	
<b>Household Income</b> (For applicants that do not qualify based upon the above options)	

To be eligible for the swim lesson scholarship based on income, household income must fall within the income guidelines based upon HCD income limits for Riverside County.

<b>Household size</b>	<b>Annual income Limit</b>	<b>Monthly Income Limit</b>
1	\$35,900	\$2,991
2	\$41,000	\$3,416
3	\$46,100	\$3,841
4	\$51,250	\$4,270
5	\$55,350	\$4,612
6	\$59,450	\$4,954
7	\$63,550	\$5,295
8	\$67,650	\$5,637

I certify that all statements on this application are true and complete to the best of my knowledge and belief. I understand that untruthfulness or misleading answers are cause for rejection and/or removal from the eligibility list.

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

**\*\*\*For office use only\*\*\***

Date Received:\_\_\_\_\_ Reviewed by\_\_\_\_\_

\_\_Approved \_\_Denied

Comments:\_\_\_\_\_

Date Return email sent \_\_\_\_\_

Promo Code\_\_\_\_\_