



# The Tyler Greene & Taylor Grant Foundation

## Tyler Lamar Greene Swim Scholarship

### Applicant Information

Child's Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Parent or Guardian's Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Could you put your child in swimming lessons if the scholarship was unavailable? YES ☐ NO ☐

Is your child comfortable in the water? YES ☐ NO ☐

Has your child taken lessons before? YES ☐ NO ☐

When and where? \_\_\_\_\_

Does your child have any special needs/accommodations that we need to know? YES ☐ NO ☐

If yes, explain:

---

---

### Emergency Contact

*Please list three Emergency Contacts.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

#### **Disclaimer and Signature**

*I certify that my answers are accurate and complete to the best of my knowledge.*

*If this application leads to a scholarship award, I understand that false or misleading information in my application may result in forfeiture of the scholarship award.*

*I agree that the child listed above will complete ALL scheduled swimming lesson classes. I understand that failure to do so will result in the forfeiture of the scholarship, and all expenses paid (scholarship award and legal fees) by The Tyler Greene & Taylor Grant Foundation (TG<sup>2</sup>) MUST be reimbursed.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# PHOTO USE RELEASE FORM

I, \_\_\_\_\_, at this moment grant and authorize The Tyler Greene & Taylor Grant Foundation (TG<sup>2</sup>) the right to take, edit, alter, copy, exhibit, publish, distribute, and make use of any and all pictures or videos taken of my child to be used in and or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalists, websites, social networking sites, and other print and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats, and markets now known or hereafter devised. This authorization shall continue indefinitely unless I authorize to revoke said authorization in writing.

I understand and agree that these materials shall become the property of TG<sup>2</sup> and will not be returned.

I, at this moment, hold harmless and release The Tyler Greene & Taylor Grant Foundation (TG<sup>2</sup>) from all liability, petitions, and causes of action which I, my heirs, representative, executors, administrators, or any other persons may make while acting on my behalf or behalf of my estate.

I warrant that I am of the age of consent (18 years or older) and competent to contract in my name. Before signing below, I have read this release and fully understand its contents, meaning, and impact.

(Parent/Guardian Signature)

(Date)