



Watermark for Kids Coach Affidavit

DATE: _____

WATERMARK FOR KIDS COACH

Name: _____ Community Name: _____

Email: _____ Phone: _____

Check box to confirm Coach is 18 years or older.

Are you a Watermark associate? Yes No If yes, title? _____

Are you a Watermark communities resident? Yes No

WATERMARK KID

Name: _____ Age: _____ (Must be 6-22 years of age.)

PARENT/GUARDIAN (if applicant is under 18 years of age)

Name: _____

How do you know your Watermark Kid?

Funds Requested: \$ _____ Date funds are needed: _____

Please provide details of exactly how funds will be spent. List dollar amounts and store/vendor names where each product or service will be purchased.

Please explain your understanding of the applicant's financial background. Please explain why you believe they are financially under-resourced.

Describe how you believe this award will influence the life of your Watermark Kid and enable them to *thrive*.

WATERMARK COACH COMMITMENT

As a Watermark for Kids Coach, I am committed to providing guidance, support, and encouragement throughout the entire process. Additionally, this includes ensuring that images and testimonial are submitted within 60 days.

SIGNATURE

Watermark for Kids Coach: _____ Date: _____

