

City of Newberry Parks and Recreation Financial Assistance Application

24880 NW 16th Ave Newberry, FL 32669 Phone: 352-472-5663 Fax: 352-472-2375 <u>www.ci.newberry.fl.us</u>

The City of Newberry Parks and Recreation endeavors to make recreation opportunities available to all interested Newberry residents, regardless of income. To that end, we provide financial assistance to those who might not otherwise be able to participate. To be qualified as a Newberry Resident, you must reside within the city limits of Newberry. **Proof of residency and income is required.**

Please complete this application and submit it with the requested income verification and residency documentation. You will be contacted by email or phone with the status of your application.

Financial Assistance applications are valid for one (1) program. A new application must be submitted for each program that you are requesting assistance. Forms must be filled out completely. Anything left blank may result in denial of scholarship application.

At least one form of income verification is required. Any of the following are acceptable:

- Copy of most recent Federal Income Tax Return
- Last four (4) pay stubs

Circle:

Yes

- Verification of reduced or free lunch from school district
- Verification of other income (Social Security, Unemployment, Child Support, Food Stamps, etc.)

| Participa | nt's Name: | | Age: | | |
|--|---------------------------------------|---------------------------------|---------------------------|-------------------------|--|
| Mailing Address: | | | | | |
| Person requesting financial assistance: | | | | | |
| Email Address: Phone# | | | #: | | |
| Relationship to participant: Acti | | | y: | | |
| | | | Yes | | |
| Does this child participate in the free lunch program? | | | | No | |
| Does this child participate in the reduced lunch program? | | | | No | |
| Is the person requesting financial assistance a City of Newberry Resident? **Please provide documentation** | | | | No | |
| | **Please | provide documentation** | Example: \$100/monthly \$ | 100/twice a month | |
| | | | \$100/weekly | 200, 111100 0 111011111 | |
| Complete as you would on your Federal Income Tax Form - include all sources of income in your household. | | | | | |
| Name | Earnings from work before deductions | Welfare, child support, alimony | Allo | All other income | |
| | \$ | \$ | \$ | | |
| | \$ | \$ | \$ | | |
| | \$ | \$ | \$ | | |
| | \$ | \$ | \$ | - 25 | |
| \$ | | \$ | \$ | \$ 3 | |
| | \$ | \$ | \$ | | |
| Have you | received financial assistance from th | e Parks & Recreation Depar | tment before? | | |