



RECREATION PROGRAM FEE WAIVER GUIDELINES

PURPOSE

The Recreation Program Fee Waiver policy has been established to provide guidelines necessary to allow all youth and/or their families residing in the City of Appleton the opportunity to participate in recreation programs offered by Appleton Parks and Recreation, regardless of their financial status.

AVAILABILITY

Fee waivers are available to all City of Appleton youth who wish to participate in instructional programs, sports league participation, or obtain an annual pool pass or family pool punchcard. Adults are not eligible to apply for instructional programs under the Fee Waiver Policy. All approved fee waiver applicants will have the ability to receive one family punchcard good for fifteen (15) pool admissions for a family (limit one per family) during the calendar year.

Youth pool passes are valid for January 1 through December 31 of the calendar year. To be eligible for an annual pool pass, the youth must register for a swim lesson program, attend at least 70% of the classes, and present the swim test card to the City Hall 1st Floor Customer Service Center. One parent or guardian may also receive an annual pool pass at that time.

Fee waivers are not available for youth participation in playground trips, dance costumes, replacement pool passes or programs offered through a partnership with another agency.

ELIGIBILITY

Fee waivers will be granted based on the youth's family income status. Income status will be determined based on the Appleton Area School District National Lunch Program income scale. Applicants who meet the income guidelines for the free or reduced lunch program shall be deemed eligible for a fee waiver. Applicants must submit a copy of the letter from their school district stating that their child(ren) qualifies for the free or reduced lunch program along with the signed fee waiver application.

The maximum fee waiver per youth is \$75.00 per calendar year. Requests for family pool punchcards shall not apply to the individual fee waiver limit. All applicants are required to pay \$5.00 toward the registration fee for each program. There is no \$5.00 co-pay for family pool punchcards or youth pool passes. Proof of residency must be enclosed with the attached application. A driver's license, utility bill, apartment lease or current tax bill may verify residency of the applicant. Children's residency is determined by their address registered where they attend school.

APPLICATION PROCESS

City of Appleton residents may apply by completing a request form signed by an adult member of the household. Applicants who do not have students that qualify for the free or reduced lunch program must submit an acceptable household income statement. Household income statements must include a copy of one of the following: the applicant's most recent Internal Revenue Service Form 1040, last two pay check statements, or Notice of Decision form from Social Services showing current food stamp and AFDC qualifications.

Hardship cases will be reviewed and should be explained in writing on the request form. Hardship referrals may be accepted from the applicant, applicant's clergy, school staff or other social service agencies.

REVIEW

Applicants will be reviewed by the Parks and Recreation supervisor or designee. **All applicants must allow two weeks for processing. Fee Waiver applications will not be approved in person or at time of application.** Applicants will be notified by mail of their funding status. Application and financial information will be kept strictly confidential.

****IMPORTANT****

APPLICATION INSTRUCTIONS

- 1. Fill out attached two-sided application completely. Make sure you sign the form on page 2.**
- 2. Enclose proof of residency (driver's license, utility bill, apartment lease or current tax bill). Your application will not be considered without proof of residency.**
- 3. Enclose a copy of the letter from your school district stating that your child(ren) qualify for the free or reduced lunch program.**
- 4. Enclose proof of aid listed under "Application Process" above if your children do not receive free lunch at school.**
- 5. Enclose \$5.00 per program requested. There is no \$5.00 co-pay for pool coupons or passes. Your check will be returned if you are not approved for the Fee Waiver program or classes you have requested are filled.**
- 6. Enclose a registration form available at www.appletonparkandrec.org or at Appleton Parks & Recreation Customer Service on the 1st Floor of City Hall if you are applying for youth instructional classes.**

APPLETON PARKS AND RECREATION DEPARTMENT

RECREATION PROGRAM FEE WAIVER

CONFIDENTIAL FINANCIAL AID APPLICATION

(Please print) Date of Application: _____

Name of Parent/Guardian: _____ Age: _____

Address: _____ Zip: _____

Phone: (H) _____ (W) _____

Email address: _____

Program Applying for:

_____ Amount: _____

Check here if applying for family pool punchcard (a coupon is good for fifteen admissions to the pools).

Family information (please list each person in the family):

FIRST NAME	LAST NAME	MALE (M) or FEMALE (F)	DATE OF BIRTH	CURRENT GRADE

My family currently qualifies for free or reduced lunch at school: Yes No

If yes, please list school: _____

Report of Household Income – **If you do not receive free lunch ATTACH ALL THAT APPLY** – wage statements, AFDC, Notice of Decision, IRS Form 1040, or Social Security documentation.

Income Source

Monthly Amount

Hardship application – please give brief reason for application:

I hereby verify that the information stated on this application is true.

Applicant's Signature
(must be 18 or over)

Date

Submit this form by mail to Appleton Parks and Recreation, P.O. Box 1976, Appleton, WI 54911 - **OR** - Submit this form in person to Customer Service at 100 N. Appleton St. in City Hall.

Processing time is two weeks. Applications will not be approved in person or at time of application. Applicants will be notified by mail.

Please note: You may include your registration form with this application. Your request will be entered into the registration process immediately following approval.

A new form must be completed for every request.

(OFFICE USE ONLY)

Status:

_____ Approved
_____ Declined

Proof of residency received: _____
Total amount received: _____
Co-payment received for which programs: _____

<input type="checkbox"/> Family Pool Punchcard sent
Coupon #: _____

Reason: _____

Fee Waiver: _____ Amount

Authorized Signature _____ Date _____

Comments:

