

# FEE ASSISTANCE APPLICATION

### Dear Applicant:

It is part of our mission of the Bangor Parks and Recreation Department to offer Bangor residents, regardless of abilities, the opportunity to participate in diverse, challenging, and high-quality recreation programs that are accessible and affordable. We provide fee assistance to those who might not be able to participate because of income.

How to Apply – (boxes will be check by Parks and Recreation Staff upon submission of application)	
	Complete the application form and return to Bangor Parks and Recreation.
	Enclose a proof of residency (current utility bill, housing lease, etc)
	Enclose proof of income (for all household adults)
	<ul> <li>Copy of your most current month's paystubs (if employed)</li> <li>Copy of your most current year's income tax return (if un-employed)</li> <li>AND</li> <li>Second Parent/Guardian/Household Adult Contribution if applicable.</li> </ul>
	f child is getting assistance/support from another program (ex. Food Stamps, DHHS, TANF), please provide uthorization letter.

#### Fee Assistance Eligibility:

- You or your child must be a City of Bangor Resident. (No other areas will be considered)
- The participant is under the age of 18.
- > The yearly family income is within the State of Maine income eligibility guidelines.
- ➤ All required documentation is provided.

### **Fee Assistance Guidelines:**

If income guidelines are met, the fee assistance will subsidize between 20% and 50% of the sport/class/program/activity fee. *NOTE: Not all sports/classes/programs or activities are eligible for assistance.* (see staff for qualified programs)

- If fee assistance is approved you are expected to abide by our payment policy ("You are required to pay for every week that your child is registered, regardless of attendance. Payment is due before the start of the week or the start of each program. We reserve the right to remove anyone from the program whose account becomes past due"). Failure to do so may forfeit your fee assistance.
- > If approved, the assistance will be in effect from the date approved and for up to ONE year, unless noted and/or changes are made to your household. After the expiration date, a new application is required.
- Fee assistance percentages may change yearly based on the Income Eligibility.
- Qualified applicants will be considered without regard to race, color, ancestry, religion, national origin, sex, age, disability, medical condition or marital status. In accordance with the Americans with Disabilities Act (ADA), if special accommodations are necessary at any stage of the application process, please provide the City of Bangor Parks and Recreation Department with advance notice and every attempt will be made to consider your request

For more information, please contact the Bangor Parks and Recreation Office at 207-992-4490. The office is located at 647 Main Street, Bangor. Office hours are 8:00am to 4:30pm, Monday through Friday.



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Applications may take up to two weeks to process.

Please submit as early as possible as programs may fill up.

Date Received:

Date Reviewed:

Expiration Date:

Approved / Denied

Amount Discounted:

Department Signature

\*Monthly income includes all income. Examples: Wages/Salaries/Tips, Social Security, Disability Benefits, Unemployment, Workers Comp, Pensions, Welfare/Child Support/Alimony, etc. Parent 1/Guardian Name (please print) Relationship to Applicant \*Monthly Income Address City Zip Phone # E-mail address Parent 1 - Employer: Phone #: Parent 2/Guardian/2<sup>nd</sup> Household Adult Name (please print) \*Monthly Income Relationship to Applicant (please list contribution regardless of marital status) Address City Zip E-mail address Phone # Parent 2 - Employer: Phone # What School does your child attend for this School Year: (Abe Lincoln / Down East / Fairmount / 14th St / Fruit St / Mary Snow / Vine St / Other) M/FSchool Participants/Child Name D.O.B. Grade **Program Name Other Means of Support:** (Please check all that apply) ☐ TANF ☐ Supplemental Security Income (SSI) ☐ School Lunch Assistance ☐ Supplemental Security Disability Insurance (SSDI) ☐ HUD/Subsidized Housing Women, Infant & Children (WIC) ☐ Food Stamps **Yearly Family Income:** Number of children in household:

I/we, the undersigned, understand that the information given will be kept confidential. The information provided is true and complete to the best of my knowledge and belief. I consent to the disclosure of such information for purposes of income and verification related to my/our application for financial assistance. I agree to allow the Bangor Parks and Recreation to speak to a representative from any of the above means of support to verify assistance. I understand that any misstatement of material fact will be grounds for disqualification. I agree to pay any outstanding balance I have on my household account after all scholarship money has been applied.

Applicant's Signature Today's Date