

Town of Washington Recreation Commission Fee Waiver/Scholarship Program

The Town of Washington Recreation Commission, together with generous support from the Millbrook Tribute Garden, is pleased to be able to provide financial assistance to eligible families to help defray costs of participating in regular summer Town recreation programs. The Commission believes that financial hardship should not preclude participation in summer recreation programs. To that end, the Commission offers citizens three options: 1) a full scholarship with the entire program fee waived; 2) a partial scholarship with the participant paying a portion of the fee; or 3) a payment plan agreed upon between the participant and the Commission.

In order to be considered for the Fee Waiver/Scholarship Program, the following criteria must be met:

The Financial Assistance Application must be complete and

the applicant must be a Town of Washington resident or a resident of the Millbrook Central School District.

The following criteria will be applied in determining eligibility for the fee waiver/scholarship program:

- 1. Scholarships will be awarded on a first come, first serve basis. Scholarships are awarded based on available funds.
- 2. Priority will be given to first time applicants.
- 3. Priority will be given to applicants who are eligible for the Free and Reduced Price Lunch program
- 4. Scholarships are limited to programs costing \$50.00 or more, bus trips are not eligible for this program. Financial assistance must be requested prior to the start of the program.
- 5. Financial assistance will not be awarded if you have an outstanding balance for recreational programs.

You will receive a letter stating the amount of assistance that is available to you and, in the case of a partial waiver or payment plan, the dates on which payment is expected. You will not receive subsequent billing statements. If a partial waiver or payment plan is granted by the Commission, it is your responsibility to make payments accordingly. Please be advised that scholarship amounts and payment plans are determined at the discretion of the Commission.

Email this completed application to: recdirector@washingtonny.org or mail to Town of Washington Recreation Director
P.O. Box 667
Millbrook, NY 12545

******Application Deadline 5/1/23******



Town of Washington Recreation Commission Financial Assistance Application

Financial assistance is provided to Town of Washington residents or residents of the Millbrook Central School District only. Proof of residency must accompany this application. A new application must be completed for each calendar year.

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Work phone:	
en who reside at the	above address:
Age	School
Age/Grade/	Program Program
_ Age/Grade/_	Program
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am	
educed Price Lunch	ı Program
THE ABOVE PROG	GRAM
	ssistance from the Recreation Commission?
mat program(s):	
	work phone:en who reside at the Age Age Age at program(s) for which is needed):Age/Grade/Age/Grade/Age/Grade/_bollowing programs? Fam age

Please state the reason(s) for requesting financial assistance:
Levels of Assistance
Please indicate the level of assistance for which you are applying. If a full waiver is requested, please indicate below and sign certification. For partial waiver and payment plan options, please read those sections below.
☐ full waiver
□ partial waiver
□ payment plan
Partial Waiver
Partial waivers are available in the following increments:
☐ Participant pays 75% of cost of program(s), rounded up to the nearest dollar.
☐ Participant pays 50% of cost of program(s), rounded up to the nearest dollar.
☐ Participant pays 25% of cost of program(s), rounded up to the nearest dollar.
Please select the increment for which you are applying. Final selection is made by the Commission.
Payment Plan Agreement
The following payment plan is available:
Participant page 50% of program fee at time of registration with 25% of fee due at least two weeks prior

Participant pays 50% of program fee at time of registration with 25% of fee due at least two weeks prior to start of program. The remaining 25% is due prior to the conclusion of the program.

Program balances are to be paid in full prior to the conclusion of the program. You will be notified of program balances and payment dates in a letter. It is your responsibility to meet these deadlines.

Certification

I certify that the information provided herein is true and accurate. I understand that I must notify the Town of Washington Recreation Director should my financial status change. I hereby give permission to the Town of Washington Recreation Director or his/her designee to verify the above information with the Millbrook Central School District or other officials to determine the accuracy of my financial status. Further, I recognize that I may be asked to provide documentation of household income.

Signature	Date
**This application and associated ma	aterials and communications are kept confidential.
For Recreation Commission Use Only	
Date Processed:	_
Waiver Granted:	
☐ Full	
Partial	
■ Participant 75%	
■ Participant 50%	
■ Participant 25%	
☐ Payment plan	
Waiver Amount:	_
Date letter sent:	_