Winnetka Park District





Purpose

The Winnetka Park District believes that everyone should have the opportunity to enjoy and participate in recreation activities. The Park District will attempt to provide equal opportunities for residents with financial hardships through the provision of programs with reasonable fees as well as through delayed payment plans, reduction in program fees with subsidy from the Winnetka District, and other financial assistance.

Qualifications

- 1. Applicants must reside within Winnetka Park District boundaries and pay Park District taxes.
- 2. General income thresholds to receive assistance are based on the 250% Federal Poverty Level:

Family Size	Gross Income Less Than			
2	\$45,775			
3	\$57,575			
4	\$69,375			
5	\$81,175			
6	\$92,975			

3. Other special circumstances/financial hardships such as excessive medical bills must be detailed on the attached scholarship application and will be considered on a case by case basis.

Limitations of Assistance

- 1. Assistance is available for Park District programs and season swimming beach passes only and is not valid towards daily fees, memberships, or private lessons.
- 2. Program availability is based on a first come first serve basis. If all documentation is not thoroughly completed at time of registration, enrollment can and will be delayed.
- 3. Placement in requested program is based on class availability.
- 4. If approved, the Park District can subsidize up to 90% of potential program fees.
- 5. Payment plans can be set up, but any required fees must be paid in full before another scholarship will be awarded.
- 6. Delinquency on payment plans will result in ineligibility for future financial assistance, forfeiture of scholarship, as well as potential removal from current programming.
- 7. Approval of financial assistance does not ensure continued approval for succeeding programs.
- 8. Applications must be completed annually, but any changes to a family's financial situation throughout the year must be disclosed to the Park District.

Process

- 1. The Park District encourages anyone interested in financial assistance to submit their required documentation as early as possible to avoid potentially missing out on a program or activity.
- 2. All required paperwork must be completed, submitted to the main Administrative Office at 540 Hibbard Rd., and reviewed before any scholarships will be awarded. Please do not register at any other facilities for financial assistance.
- 3. Registration will not be processed until the scholarship has been approved.
- 4. Sufficient time should be allowed for processing of your application prior to the start date of any programs or activities with which you are interested (approximately one to three weeks depending on season).
- 5. Written notification via direct mail or email will be provided upon review of your application with the amount of subsidy the Park District is providing as well as what you will owe.

Required Documentation

- 1. *Scholarship Application* -- the Winnetka Park District scholarship application must be submitted.
- 2. Registration Form -- a Winnetka Park District registration form must be filled out completely with desired programs.
- 3. *Proof of Residency* -- a copy of all wage earning household members current driver's license or state ID AND a copy of a current utility bill. The addresses on both these documents must match and reside within Winnetka Park District boundaries.
- 4. Copy of Federal Income Tax Return -- A copy of the most current Federal Income Tax Return from each adult wage earner (18 years and older) must be provided. If you have not yet filed for the current year, you are required to submit it as soon as you have a copy. Until that time, you must submit your Federal Income Tax Return from the prior year. If you do not file taxes, you must provide a notarized statement.
- 5. Copy of Recent Pay Stubs -- two (2) most recent pay stubs from each household member 18 years or older. A bank statement showing deposits can also be accepted if enough information is visible.
- 6. Additional Documentation -- documents regarding other sources of income (e.g. child support, alimony, unemployment, etc.) AND/OR public assistance (e.g. social security, public aid, housing, etc.) must also be provided.

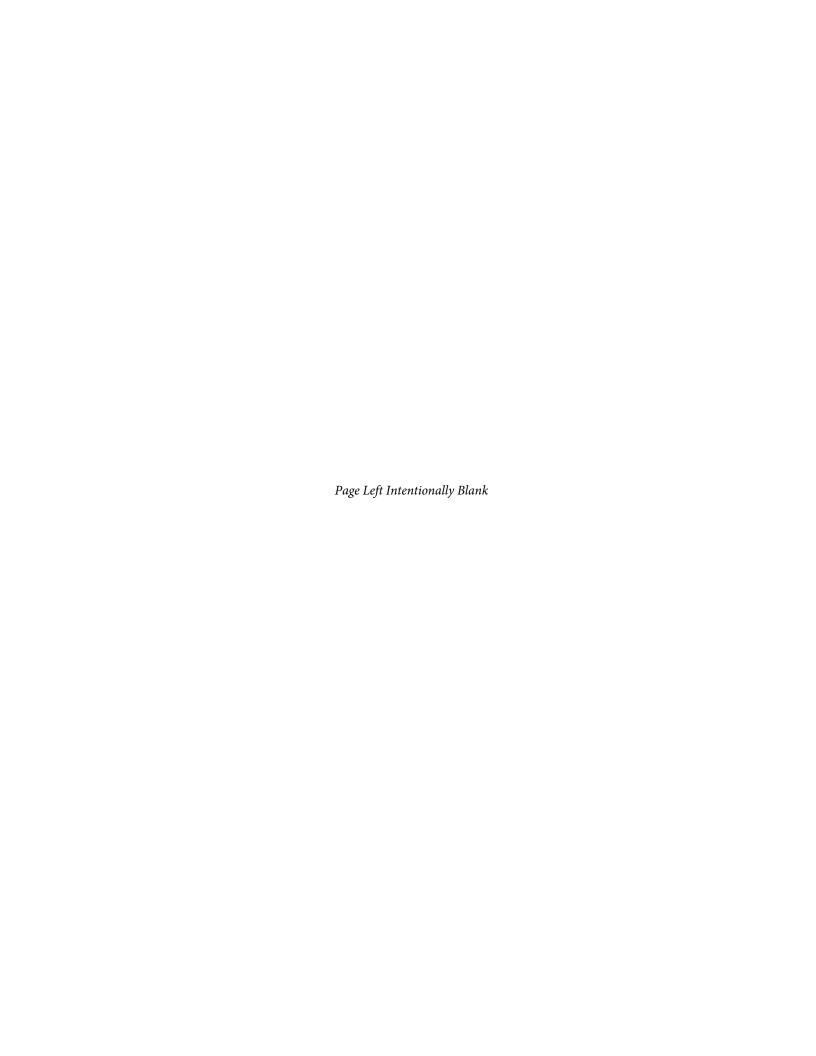
Winnetka Park District Scholarship Application

SIGNATURE OF APPLICANT:			
APPLICANT NAME (please print):	DATE:		
I affirm that all of the information I have supplied is truthful and a completion of this form, I will report these adjustments to the Winnet information be falsified in any way I assume full responsibility to re financial aid received as a result of this application.	ka Park District. I also understar	nd that should this	
you feel we should be made aware of when considering your applicatio	n		
Please detail any other financial hardships and/or special circumstances	not mentioned elsewhere on thi	s form which	
Excessive medical bills, explain:			
Social Security Yearly amount:	Subsidized housing		
	ssistance Yearly amount:		
Please check all applicable items to indicate financial need and attach Family income Annual salary / child support: \$			
Marital Status: Single Married Widowed Separated			
E-mail:	D		
Contact Alt. Phone #: ()	8)		
Contact Phone #: (7)		
Rent Own Monthly Payment: \$	6)		
How long have you lived at this address?	5)		
Address:	4)		
Family Last Name:	3)		
PHONE: (847) 501-2040 FAX: (847) 501-5779 EMAIL: wpdinfo@winpark.org	1)		
WINNERRA PARK DISTRICT 540 HIDDATA Ra., WIIITERRA, IL 60055			

Household Members

<u>Gender</u>

<u>Age</u>



Family Information

Family Last Name:		Add	ress:				
Phone:	Emergency Phone:			Email:			
American with Disab We encourage participation	ilities Act (ADA) on by everyone and provide roles, check the box to be conta			(will n accordance with ADA standard .iaison, Toby Ross. A diagnosis is	s. If you re		
Program Inf	formation			1	<u> </u>		
Activity #	Activity Name	Day/Time	Fee	Registrant's First Name	Gender	Birthday	Grad
-			\$				+
-			\$				_
			\$				_
_			\$				
-			\$				_
-			\$				1
-			\$				+
Please read this waiver ca	refully and be aware that by c	ontinuing with this	online reg	Assumption of istration and participating in the claims for any disease (including	identified p	-	-
	ry, damages, or loss that you ncluding transportation servio	-		might sustain as a result of par rovided).	ticipating i	n the above re	ferenced
agree to assume the full participation. I further agreesult of participating in (hereinafter collectively reclaims for disease, injurie individuals arising out of, District harmless from an way related to my or my dimportant information, w	risk of any and all injuries, or ree to waive and relinquish a these programs/activities a eferred as Winnetka Park Dist es, damages, or losses my mi connected with, or in any way d against any and all claims, child's/ward's participation in	damages or losses, Il claims I or my mi igainst the Winnet rict). I do hereby fu nor child/ward, or associated with th causes, injuries, da the identified prog f risk and waiver a	regardles: nor child/v ka Park D illy release I may hav ese progra images and rams/activ nd release	ease to participants in these pross of severity, my minor child/wavard, may have (or that might actistrict, including its officials, agand forever discharge the Winne or which may accrue to me, nms/ activities. Further, I do hereld losses by third parties against vities described above. I have read of all claims. If registering onliviginal form.	ard or I sus cerue to me gents, volu etka Park I ny minor c py indemni the Distric ad and fully	stain as a resule or my child/w nteers and en District from an hild/ward, or a fy, defend, and t arising from of munderstand the	It of said rard) as a nployee ny and al nny othe hold the or in any ne above
				es within Park District boundarie fees are the second fee shown			District
facilities. Please be aware	that, by signing this waiver a	nd release you are	authorizinរ	ants in a class, during a special eg g the District to use these photos nsation to you. All photos/videos	and video	footage for	
Participant's Name(s) (please print):		_ Sign	ature:		Date:	
				nd date are not on this waiver.			