

## WINCHESTER RECREATION FINANCIAL AID REQUEST FORM 2020

Please fill out this attached form and include a copy of your 2019 tax return summary  
Incomplete forms will not be considered.

Participant's name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade as of 9/1/2020: \_\_\_\_\_

School name: \_\_\_\_\_

Parent's name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you applying as a low-income family? \_\_\_\_\_ (see eligibility list)

Family Size: \_\_\_\_\_ Family Income: \_\_\_\_\_

### GUIDELINES FOR ELIGIBILITY:

Family size/Annual Net Income:

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| HOUSEHOLD SIZE: | YEARLY:  | MONTHLY: | WEEKLY: |
|-----------------|----------|----------|---------|
| 1               | \$22,311 | \$1,860  | \$430   |
| 2               | \$30,044 | \$2,504  | \$578   |
| 3               | \$37,777 | \$3,149  | \$727   |
| 4               | \$45,510 | \$3,793  | \$876   |
| 5               | \$53,243 | \$4,437  | \$1,024 |
| 6               | \$60,976 | \$5,082  | \$1,173 |
| 7               | \$68,709 | \$5,726  | \$1,322 |
| 8               | \$76,442 | \$6,371  | \$1,471 |

Each additional person: (add:) \$ 7,733      \$ 645      \$ 149

Please include a summary of any extenuating circumstances we should consider:

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Please list the name of program including program dates are requesting financial aid for:

Child 1: \_\_\_\_\_

Child 2: \_\_\_\_\_

Child 3: \_\_\_\_\_

Amount of Program: \_\_\_\_\_ Amount you are able to pay: \_\_\_\_\_

Amount Requested: \$\_\_\_\_\_

Signed: \_\_\_\_\_

Parent or Guardian

Please Print Name: \_\_\_\_\_

Today's date: \_\_\_\_\_

This request will be reviewed and an official letter of award will be mailed to you if granted approval.