Algonquin Recreation Recreation for "ALL-gonquin"

The Recreation for "ALL-gonquin" program is designed to provide Algonquin families with an opportunity to get their children involved in safe, quality recreation programs that they may not be able to afford without assistance. These activities help provide children with safe outlets for creativity, socialization, play, and learning experiences.

To be eligible for this program, families and their children must meet the following requirements:

- 1. Family must reside within the boundaries of the Village of Algonquin. Proof of residency must be attached to the application form.
- 2. Reduced fees will only be available to those under the age of 18 years or young adults still attending high school. School age youth must currently be attending school or a GED program.
- 3. Participant is participating in free or reduced lunch at school (documentation required).

Program Rules and Regulations:

All information on this application must be true and accurate. If false information, omissions, or misrepresentations are discovered, the application may be rejected. Fees are legally recovered if paid and awarded on the basis of false information supplied by the applicant, and will nullify a scholarship request. There are no <u>full</u> program fee refund fees given.

If applicant is granted assistance, they must follow current registration guidelines and pay their portion of the program fees upon registration. Being granted assistance does not guarantee your placement in the desired class. All participants have to follow the registration guidelines as outlined in the recreation brochure. An application must be submitted each year, reduced fees will be limited to five (5) programs per individual per year, or a maximum of \$250 per year. Any and all assistance is provided as funding is available.

Assistance is not available for individual swim lessons, birthday parties, facility rentals, and/or materials/equipment/costumes/uniforms.

Algonquin Recreation Recreation for "All-gonquin" Application

This application must be filled out completely.

	:	Date:			
Name:					
(Last Nat	me)	(First Name)	(MI)		
Street Address:					
City:		Zip code:			
Home Telephone:		Work Te	Work Telephone:		
Dependent Informatio	n:				
First Name:		Last Name:			
Date of Birth:	Sex:	School:	Grade:		
First Name:		Last Name:			
Date of Birth:	Sex:	School:	Grade:		
First Name:		Last Name:			
Date of Birth:	Sex:	School:	Grade:		
First Name:		Last Name:			
Date of Birth:	Sex:	School:	Grade:		
Programs Requested:	ase list on a separate sheet of				
Participant's Name	Name of Program	Program Code			

I certify that all the information submitted by me on this application is true and complete, and I understand that any false information, omissions, or misrepresentations are discovered, my application may be rejected.

Applicant Signature:			Date:	
Please be sure to attach your program	registration form proo	f of residency,	and free/reduce	lunch documents.
	CONFIDENT	IAL		