TOWN OF EASTON

P.O. Box 520
Easton, Maryland 21601
Phone: (410)822-2525 Fax: (410)820-8016
Town of Easton Department of Parks and Recreation

Application for Financial Assistance

To apply submit this completed form and proof of financial eligibility. Please include one of the following acceptable documents for proof of financial eligibility: **Last year's tax returns, Documentation from an Agency** providing assistance, **or an Independence Card**. If the required documents are not included your request for financial assistance request will not be processed. After your request has been received by the Town of Easton Department of Parks and Recreation, whose decision will be final, you will be notified of the status.

Please Note: As of January 1, 2014, Town of Easton Parks and Recreation will only provide partial scholarships.

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1. Name of person applying for assistance _____

2. Current address _____City _____
   State _____ Zip _____

3. Phone: ( )_____home ( )_____ work ( ) _____ cell

4. What is the total size of your household? (including yourself) _____

5. Gross Household Income? $_____

6. Do you currently receive assistance from any agency? _____
   If yes, what type of assistance? _____
   Name of agency _____

By signing this form you accept all the terms and conditions it represents. You also agree that all of the above information is correct and true to the best of your knowledge. If proven otherwise, your financial assistance application will be revoked and your participation for you or your family member will be revoked. The Town of Easton will keep all information provided private and confidential. This information will be made accessible to the agencies listed for verification purposes only. Town of Easton, Park and Recreation staff members handling these forms are aware of all confidentiality regulations.

Signature of Applicant: _____
Date: _____

For Town of Easton office use only:
Approved: _____ Denied: _____ % Given: _____ Balance due: _____
Initials: _____