

Maple Grove Parks and Recreation Board

APPLICATION FOR REDUCED RECREATION PROGRAM FEE

The Maple Grove Parks and Recreation board, with the assistance of civic groups and organizations, has a limited amount of resources set aside to grant scholarships for children to participate in recreational activities. Scholarships are granted according to the reduced price eligibility income table and are subject to the following conditions:

1. Scholarships will be granted only if funds remain in this account.
2. Applicants must be residents of the City of Maple Grove.
3. Applicants may receive a reduced fee only once during the same year.
4. Funding will be awarded for 1/2 the program fee per child (not to exceed \$100.00) one program per child per year.
5. Applications will be accepted for children's activities only (18 years or under).

REDUCED RATE ELIGIBILITY GUIDELINE			
HOUSEHOLD SIZE	GROSS INCOME YEAR	GROSS INCOME MONTH	GROSS INCOME WEEK
1	\$20,0360	\$1,670	\$386
2	\$26,955	\$2,247	\$519
3	\$33,874	\$2,823	\$652
4	\$40,793	\$3,400	\$785
5	\$47,712	\$3,976	\$918
6	\$54,631	\$4,553	\$1,051
7	\$61,550	\$5,130	\$1,184
8	\$68,469	\$5,706	\$1,317
For Each Additional Family Member	\$6,919	\$577	\$134

If you qualify according to the reduced rate schedule and are interested in the scholarship funds, please complete the attached application form.

Thank you.

Parks and Recreation Board

9/09

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An adult member must fill out this application and return to:

Maple Grove Parks and Recreation Board
 Attn: Mark Saari, Superintendent of Recreation
 12951 Weaver Lake Rd
 Maple Grove MN 55369 or fax to 763-494-6453

Name: (Parent/guardian) _____
 Address: _____
 Phone: (h) _____ (w or c) _____
 email address: _____

1. List the names of everyone living in your household. If you need more space, attach a separate sheet of paper.
2. List gross income before deductions for taxes, social security, etc.
3. List additional income received last month on the same line with the person who received it under the correct category (example AFDC, child support, etc.)
4. List your household total monthly income.

Household Members	Check if Under 21	Earnings From Work Before Deductions	All Income Received Last Month
Total household Monthly Income			\$

Reduced recreation fees are being requested for:

Child's Name	Age	Program
Parent's Signature:		Date:

Your application will be given every consideration and will depend solely in the amount of funds remaining in the scholarship fund. Applications are considered on a first-come, first-serve basis.