



Town of Belmont
Office of Parks & Recreation
 PO Box 310, 143 Main Street, Belmont, NH 03220
 Phone & Fax (603) 267-1865
 www.belmontnh.org

Request for Financial Assistance
For the Belmont Parks & Recreation Department Programs

This program is limited to Belmont residents unless otherwise noted. Not all programs are eligible; however, we try to offer assistance whenever possible. Late fees are not covered by financial aid. Not all requests are fully funded.

PLEASE PRINT:

Applicants Name: _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

Physical Address: _____

Mailing Address (if different): _____

Household Information:

How many in household? _____ How many 18 and under? _____

List all persons living with you:

Name:	Relationship:	Age:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you currently employed? Yes [] No []

Program you are seeking assistance with: _____ and for whom _____

Assistance amount being requested: \$ _____ total for this program.

Amount you can pay for this program, either weekly or in total: \$ _____

Is there any other information that would be helpful to determine your eligibility? _____

Eligibility:

Are you or any member of your household currently eligible for and/or receiving help from any of the following program? **If so, please check every program which applies to your household and provide backup documentation as proof of current enrollment/receipt.**

- [] Fuel Assistance
- [] Food Stamps
- [] Free and reduced school lunches
- [] Women, Infants and Children (WIC)
- [] Medicaid (State Welfare)
- [] Commodity Supplemental Food Program (CSFP)
- [] Aid to the Needy Blind
- [] Temporary Assistance to Needy Families (TANF)
- [] Old Age Assistance
- [] Aid to Permanently and Totally Disabled (APTD)
- [] County, City or Town Welfare
- [] Subsidized Housing (Rental Subsidy)

I understand that this information provided will be used only to determination financial need for a Belmont Parks and Recreation Program. This information is confidential and will not be disclosed beyond the Recreation Department. I hereby certify that the above information is true and accurate. I understand that it is sought in connection with determining my eligibility for financial assistance for me or my family members participating in a Belmont Parks and Recreation Department Program.

Signature of Applicant

Date

Applications for Summer Camp must be received by Wednesday, May 3, 2017.

All other programs must be received at least 2 weeks prior to the start.