



**RECREATION
AND FITNESS
RESOURCES**

FINANCIAL ASSISTANCE APPLICATION

Name

Date

Billing Address

City/State/Zip

Email

Phone

POLICIES

Recreation and Fitness Resources welcomes all applications and will consider every request for Financial Assistance.

Financial Assistance can be applied to all RFR memberships, classes, and programs. It is not accepted for facility rentals, birthday parties and events.

Please complete this application (front and back) and submit it with the requested income verification documentation. You will be notified by email (or phone if no email) if and when your assistance has been approved.

Financial Assistance Applications are good for two years. After two years, you will be asked to submit a new application and income verification.

At least one form of income verification is required. Any of the following are acceptable:

- **Last year's Federal Income Tax return**
- **Current pay stub**
- **Verification of reduced or free lunch from school district (excluding School District of Bayfield)**
- **Verification of other income (AFDC, Social Security, Unemployment, Child Support, Food Stamps...)**

If you do not have any form of income verification, please come in and talk to us.

FIND YOUR FIT WITH RFR AND MAKE THIS YEAR YOUR YEAR!

www.recreationandfitnessresources.org | 715-779-5408 | info@recreationandfitnessresources.org

140 S Broad St | PO Box 1146 | Bayfield, WI 54814

RFR offers need-based Financial Assistance for all of our memberships, programs, and classes.

Visit our office or our website for more information or to apply.

INCOME

Complete as you would on your Federal Income Tax form - include all sources of income in your household.

Employer _____

Approx. Annual Income _____ Employer's Phone _____

Employer _____

Approx. Annual Income _____ Employer's Phone _____

Employer _____

Approx. Annual Income _____ Employer's Phone _____

Employer _____

Approx. Annual Income _____ Employer's Phone _____

Employer _____

Approx. Annual Income _____ Employer's Phone _____

This year's expected total family income: \$ _____

Last year's total family income: \$ _____

HOUSEHOLD

Complete as you would on your Federal Income Tax form - include people living in your household supported by your income and your children under the age of 18 or currently enrolled in school.

Children

1	_____	Age	_____	School	_____
2	_____	Age	_____	School	_____
3	_____	Age	_____	School	_____
4	_____	Age	_____	School	_____
5	_____	Age	_____	School	_____

Adults

1 _____
2 _____

I pledge that the all information on this application is honest and correct.

Signature of Applicant, Parent, Guardian, or Conservator _____
Date

Name of Caseworker/Social Worker/Counselor (if applicable) _____
Phone