



CITY OF PORTLAND, MAINE
 Department of Recreation & Facilities Management
 134 Congress Street ~ Suite 2
 Portland, ME 04101
 207-756-8275 / Fax 756-8279
 Keith Hansen / kh@portlandmaine.gov

RECREATION DIVISION 2008 FEE WAIVER APPLICATION

For Recreation & Aquatic Programs with a begin date between February 1, 2008 – January 31, 2009

PROCEDURES

- Fee waiver applications received without all requested information will not be processed and will be returned to you.
- Please attach a copy your fee waiver confirmation letter to your registration form in order to register for programs.
- This *is NOT* a registration form. You must fill out a registration form in order to register for Recreation / Aquatic Programs.
- Registration forms received without payment will not be processed and will be returned to you.

PART 1 ~ APPLICANT INFORMATION

Primary Parent / Guardian Name							
Street Address		PO Box or Apt #		Zip Code			
Mailing Address		PO Box or Apt #		Zip Code			
Home Phone		Cell Phone	Work Phone		Ext		
City of Legal Residence			Email Address				

Secondary Parent / Guardian Name							
Street Address		PO Box or Apt #		Zip Code			
Mailing Address		PO Box or Apt #		Zip Code			
Home Phone		Cell Phone	Work Phone		Ext		
City of Legal Residence			Email Address				

PART 1-A HOUSEHOLD LIVING ARRANGEMENT

(Please check any that apply.)

I live alone with child(ren).		I live with spouse.		I live with domestic partner.	
I live with my relative <i>(Please specify relationship, i.e. Mother, Father, Aunt etc.)</i>					

PART II ~ HOUSEHOLD INFORMATION

You must list all persons living in your household and complete all sections for each person.

	Full Name of Each Member in Household	Sex	Age	Date of Birth	Relationship to Applicant
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

PART III ~ DEPARTMENT OF HEALTH & HUMAN SERVICE (D.H.H.S.)
TANF OR ASPIRE SUPPORT

If you are not receiving support from D.H.H.S, please skip to Part IV

1.	What is your TANF Case Number? <i>(Please attach a copy of your latest TANF Benefit Statement.)</i>	
1A.	What is your TANF Case Worker's Name?	
2.	What is your ASPIRE Case Number?	
2A.	What is your ASPIRE Case Worker's Name?	

PART IV ~ HOUSEHOLD INCOME

*List **ALL MONTHLY** income earned or received for each member of your household.*

*You must list **GROSS INCOME** (before deductions, taxes, etc.)*

List name of all members of household earning or receiving income.	Work Employment	TANF ASPIRE	Social Security	Child Support	Rental Income	Disability SSI/SSDI	Pension Retirement	Worker's Comp	Other (i.e. savings)
1.									
2.									
3.									
4.									

*You must provide a copy of **ALL** earned-income statements (i.e. social security, disability, pension statements, etc.). **In addition**, you must provide the following:*

<i>1. Copy of 2007 Federal Tax Forms</i>	<i>2. Copies of all 2007 W-2's</i>	<i>3. Copies of (3) consecutive most recent pay stubs</i>
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PART V ~ HOUSEHOLD EXPENSES

*List **ALL MONTHLY** expenses for your household.*

Rent Mortgage	Heating Costs	Electric Costs	Water Sewer	Home Phone	Cell Phone	Cable Satellite	Auto Loan(s)	Auto Insurance	Other Loan(s)	Food Non-Food	Other (i.e. Student Loans, etc) Specify: _____
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

1. You must provide a copy of a most recent statement and/or bill of all expenses listed above.
2. Copies must include monthly payment totals.
3. For security purposes, please remove all personal information (i.e. account numbers, phone numbers, etc.) from your copies prior to submitting the application package.
4. Please note that copies **ARE NOT** returned.

PART VI ~ APPLICANT CHECKLIST

Applications will not be processed without all requested information and will be returned to you.

To avoid delays in processing your application, please check off each item below to ensure your application will be processed in a timely manner.

QUESTIONS		"X" or N/A
1.	I have completed PART I (Applicant Information) of this application.	
2.	I have completed Part II (Household Information) by listing all members living in my household, including age, sex, date of birth and relationship to myself for each member of my household.	
3.	I have completed Part III (TANF / ASPIRE Support ~ if applicable) and have included my Case Number, Case Worker's Name and a copy of my most recent TANF benefit statement.	
4.	I have completed Part IV (Household Income) and have listed all earned income received by all members of my household.	
5.	I have provided a copy of all earned-income statements (i.e. social security, disability, pension statements, etc.)	
6.	I have provided a copy of my 2007 Federal Tax Forms	
7.	I have provided a copy of my 2007 W-2's for all jobs for each member in my household.	
8.	I have provided (3) most recent consecutive pay stubs.	
9.	I have completed Part V (Household Expenses) and have listed all monthly household expenses.	
10.	I have removed all account and telephone numbers and have provided copies of all monthly statements and/or bills.	

PART VII ~ CERTIFICATION

I certify that I am a resident of the City of Portland, Maine and that all of the above information is true and correct and that all monthly income and expenses are accurately reported. Furthermore, I authorize the release of information regarding eligibility of this Fee Waiver Application from D.H.H.S. or other official sources.

Signature		Date	/	/
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