# Financial Assistance Program

*Financial Assistance Request Brochure*

## Gaukler Family Wellness Center Pass

Financial assistance is given to qualifying individuals and families to the wellness center. Those interested in applying for **Gaukler Family Wellness Center Pass** need to complete the Financial Assistance Application <u>and attach all copies of financial verification</u>. Documentation should be returned to the VC Parks and Rec at the Gaukler Family Wellness Center.

Financial assistance is based on a review of the applicant's household income, extenuating circumstances, and are granted to the extent of funds available.

> ### *Requirements once financial eligibility is approved.*
>
> - **Each family member on the membership, ages 9 and older, MUST meet the minimum admittance of 12 times EACH every 60 days. *This will be tracked closely*. If criteria is not met, the VCPR reserves the right to stop membership without notice. Scholarship will no longer be available to you for remainder of the year. If a cancellation is requested within the 60 days by member, this will result in the ability to restart at a later date.**
> - Complete orientation provided by VC Parks and Rec if you have not been through the facility.

**Who determines whether or not my request is granted?**
VC Parks and Rec have staff trained to review and process applications in a timely manner. All documentation, including financial verification needed must be included to process the application. If you have special circumstances staff will review your application and decide within 2 weeks. You will be contacted when the decision has been made.

## VC Parks & Rec Programs and Outdoor Swimming Pool Pass

provides vouchers to qualifying individuals to participate in select summer youth programs (maximum of 2 per summer) at a reduced cost. Those interested in applying for **VC Parks & Rec Programs and/or Swimming Pool Pass** shall obtain a letter from their school indicating their eligibility for Free or Reduced meals. Return letter to VC Parks and Rec office located at the Gaukler Family Wellness Center.
No documentation is required for those with disabilities signing up for adaptive programs. The adaptive programs will be offered at a 50% reduction.

### Income Verification Checklist for Gaukler Family Wellness Center (reduced pass)

## This program is confidential. Please read carefully to ensure you attach <u>ALL documents</u> for each member of the household to this form.

*Please turn in this sheet along with the following items:*

1. Completed Application Form
2. Health/Fitness Pre-Participation Survey
3. Documentation for you and anyone in the household:

All members of the household over 18 that are employed *MUST* include:
- At least 4 full weeks (one month) of current pay stubs – or
  - If you do not receive a pay stub, salary verification, or a letter from your employer must be submitted
- And a copy of your most recent Income Tax Return showing your total income
- If you are self-employed, you must submit your latest business and personal Income Tax Return

If you are unemployed provide the following:
- You must submit your State Unemployment documentation
- A copy of your most recent Income Tax Return
- If you are a receiving Workers' Compensation, please provide documentation

Provide a verification letter of any public assistance received by *any* member in the household, such as:
- Section 8 Housing or other subsidized housing assistance
- Itemized worksheet showing monthly assistance income
- Disclosure of assistance of utility bills
- Copy of Veteran's Benefit Statement
- Verification of Alimony, showing the amount received
- Child Care Assistance
- Verification of Child Support you receive
- Social Services Statement/Foster Child payment slip
- If you are receiving SSI, SSDI, TANF, SNAP, WIC, Refugee Cash Assistance, General Assistance, Medicaid, or Medicare, please submit a copy of the award letter showing the amount received monthly

If you have any extenuating circumstances that prevent you from affording membership, please attach to this document.  This may include a statement from your doctor.

Please list your insurance provider: _____

Does your insurance provide a wellness benefit? Yes-No-Unsure _____

Membership Type: Youth, Individual, Family, or Senior_____

**Once financial eligibility is approved: 1. Complete orientation by VC Parks and Rec   2. Be aware that all individuals on membership ages 9 and older MUST use the facility a minimum of 12 times per 60 days.**

**Applicant Name _____Phone _____**