2012 Aquatics Financial Assistance Request

Robert J. DeRubeis, Commissioner

Newton Parks and Recreation
124 Vernon Street
Newton, MA
USA
02458
Phone: 617-796-1500
Fax: 617-796-1512
http://www.newtonma.gov/gov/parks/default.asp

Date:

◯ **Gath Pool** ◯ **Crystal Lake**

Personal Information

Name :

Address :

State :

Zip :

Home Phone:

Cell Phone :

E-mail address:

Reason for application

☐ **Unemployed** ☐ **Disability** ☐ **Qualifying Income**

Additional Household Members

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Name : **D.O.B. :**

Eligibility Maximum Income Limits

Please check off the income level you qualify for under guidelines set forth in this document. All applications are kept confidential.

# In Family	50% area Median	80% area Median
1	☐ **$34,250**	☐ **$45,500**
2	☐ **$39,150**	☐ **$52,000**
3	☐ **$44,050**	☐ **$58,500**
4	☐ **$48,900**	☐ **$65,000**
5	☐ **$52,850**	☐ **$70,200**
6	☐ **$56,750**	☐ **$75,400**
7	☐ **$60,650**	☐ **$80,600**
8	☐ **$64,550**	☐ **$85,800**
	50% of median income	80% of median income

Description	Quantity	Unit Price	Amount
Adult Swim Permit		$45.00	$0.00
Student Swim Permit		$20.00	$0.00
Senior Swim Permit (62 and over)		$20.00	$0.00

Total Aid Request	**$0.00**

The City reserves the right to request additional information to qualify your request for Financial Aide which may include :

☐ Prior year tax return ☐ Proof of Residency

☐ Two consecutive pay stubs ☐ Unemployment Comp.

I certify that all statements made by me above are true and accurate.

Original Signature of Applicant Required