Application Submission Date:___/___/____
Scholarship awarded through: ____/_____
Amount Awarded _____
Staff Initials_____

RFR RECREATION AND FITNESS RESOURCES

Recreation and Fitness Resources Scholarship Application

Recreation and Fitness Resources offers a needs-based scholarship fund made available by individual and business contributions. It can provide you with a membership or program scholarship you can afford, whether you are applying as an individual or a family. A family is defined as a "membership unit," meaning all members of the submitting household.

Application Process (Please read carefully):

Complete this application in its entirety. Applications not entirely filled out will delay processing. If there are any missing documents, an attempt to contact will be made and the applicant will be responsible for supplying the missing document. Once an application and all applicable documents are turned in to Recreation and Fitness Resources, please allow 14 days for applications to be processed. You will receive a phone call and email (or letter if you request) within two weeks of your application, notifying you whether or not you have been approved for assistance.

Here at RFR we award scholarships ranging from a 40-60% in membership dues. Depending on the scholarship awarded, it may apply to certain programs. Awards are good until April 15 of the following year, at which time your scholarship will automatically terminate. If you would like to continue at the end of your time, you will need fill out a new scholarship application if still applicable.
Memberships must be activated within 60 days of the award letter date. If a membership is not activated within 60 days, the applicant must reapply.

Membership Payment Options:
Payment must be provided to activate membership. There are 2 different options for payment when activating a membership.

i. **Monthly Automatic Credit or Debit Card Withdrawal –** Provide your card information to get started with this payment option.
ii. **Monthly, Quarterly or Annual Payments** - Payments can be made with cash or check or credit card. Credit card payments can be accepted in person or over the phone. **At this time we cannot accept payment for financial aid memberships via our website.**

STEP ONE: Enter Household Information

Full Name: _____

DOB:_____/_____/_____ **Age:**_____ **Gender:**_____

Phone #: _____

Email: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

List additional household members (proof of same address may be requested):

	Full Name	Birthdate	Relationship
1.	_____	___/____/____	_____
2.	_____	___/____/____	_____
3.	_____	___/____/____	_____
4.	_____	___/____/____	_____
5.	_____	___/____/____	_____
6.	_____	___/____/____	_____

STEP TWO: Verify current total household income and submit documents

What is the total annual household income? $_____
Special Circumstances (if any): _____

Submit a copy of the appropriate documents that verify your income for all adults in household, such as:

- **REQUIRED BY ALL APPLICANTS: Last year's tax return – form 1040 OR non-filing letter from IRS www.irs.gov or (800)829-1040. Applicants who do not have copies of their federal tax return or are not required to file taxes may receive a free statement that verifies they have filed their return or are not required to by law. Telephone Request available from the IRS by calling 1-800-908-9946. Non-filers can expect to receive a paper IRS Verification of Non-filing Letter at the address provided in their telephone request within 5 to 10 days from the time of the request. A Verification of Non-filing Letter can also be obtained using the IRS Get Transcript Tool or by filing IRS Form 4506-T. Low-income families are unlikely to satisfy the security requirements to use the online Get Transcript tool.**
- **SSI/Disability Award Letter (if applicable)**
- **Award letter or disbursement history for ALL government assistance (if applicable)**
- **2 paystubs OR a letter from employer verifying income (if applicable)**
- **Unemployment income verification letter (if applicable)**
- **If living in a group home or boarding – provide letter from home verifying that you are a current resident.**

Comments or explanation for missing document(s):

_____

_____

_____

_____

_____

_____

STEP THREE: Sources of Income

Other Income:
Please report your monthly sources of income.

Wages	$
Tips	$
SSI	$
Alimony	$
Child Support	$
Disability	$
Unemployment	$
Other	$
Other	$
Other	$
Other	$

STEP FOUR: Signature

I hereby certify that the information supplied herein is true, accurate and complete to the best of my knowledge. I am also aware that it is my responsibility to notify RFR in writing of any changes in the information supplied in this application such as income, address, living arrangement, marital status or other matters that might affect my eligibility for financial assistance. I understand that failure to comply with RFR policies can and may result in immediate revocation of membership and program privileges.

I understand my RFR scholarship is valid until April 15th of the following year.

Membership rates are subject to increase: Notice of increase of membership rates will be notified 30 days in advance. Please make sure that we have current contact info at all times.

_____ _____/_____/_____

Signature Applicant **Date**