

2025 FINANCIAL ASSISTANCE APPLICATION

PURPOSE

To assure that all Lincoln residents and Lincoln Public School students are able to access Lincoln Parks & Recreation programs, we are pleased to provide financial assistance to those that qualify. Lincoln Parks & Recreation reserves the right to exercise managerial discretion regarding financial assistance, and to limit the amount of funding allocated to any given household or individual.

GUIDE

Eligibility

- For Town of Lincoln residents only -Town of Lincoln residents are identified as those living in Lincoln or at Hanscom Air Force Base, or students who attend Lincoln Public Schools.
- Financial assistance is determined without regard to race, sex, religion, cultural heritage, political beliefs, marital status or sexual preference of the applicant or participant.
- Assistance is not available for Codman Pool Memberships, Codman Swim Team, Lifeguard/WSI classes, Tennis Memberships, event fees, trip fees or rentals.
- Assistance is not available for programs under \$50.
- Assistance is based upon your yearly income along with the current Federal Poverty Guidelines.

Application Deadlines

- To be considered for financial aid, applications are due with all supporting documents at least two weeks prior to the start of the program*.
 - *Summer camp financial aid applications must be submitted by April 11, 2025. Summer camp financial aid is not available for Early Risers or Extended Day.
- All information that is provided is kept confidential and is necessary to help determine the amount of aid given.
- Spaces for programs are limited and are accepted on a first come-first serve basis.
- Two requests per participant per session (excluding summer camp). Sessions are Winter (December-March),
 Spring/Summer (April-August), and Fall (September-November).
- Once your aid has been approved, participant must follow normal registration procedures.
- Financial aid funds are limited and will be given when funds are available. All financial aid is administered by the Lincoln Parks and Recreation Department and Committee.

APPLICATION INSTRUCTIONS

The following must be turned into Lincoln Parks and Recreation Department by the above stated dates to be considered for assistance.

YOUR APPLICATION WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING SUPPORTING DOCUMENTS:

- a) Completed Lincoln Parks & Recreation Financial Assistance Application
- Proof of Residency (i.e. copy of driver's license, utility bill), or proof of child's enrollment in Lincoln Public Schools.
- c) Supporting documentation of other financial program enrollment (see page 2).

Submit applications and supporting documents in one of three ways:

- 1. Drop off at the Parks & Rec Office: 6 Ballfield Rd. Hartwell A Pod, Lincoln, MA
- 2. Mail to Lincoln Parks & Recreation: 16 Lincoln Rd. Lincoln, MA 01773
- 3. Email to Parks & Recreation Office Manager, Laurie Dumont at LDumont@lincnet.org

Once your application is received, Parks and Recreation will contact you.

Failure to provide/falsify any of the required documentation will result in your application being returned and voided.



Financial Assistance Application

PARTICIPANT Information (A	separate appl	ication is required for each p	articipant)			
First Name:	Las	st Name:			[D.O.B:/_	/
Address:							
City:		State:	Zip:				
Grade (Entering Fall 2025):		School:					
Parent/Guardian Information							
First Name:					[D.O.B:/_	/
Address:							
City:		State:	Zip:				
Home Phone:		Cell Phone:					
Email Address:							
Program Information (List all pro	ograms in the	table below)					
I am requesting financial assistanc	e for the foll	lowing Program(s)/Camp	Session	n(s):			
,			Season Circle one			Program Fee	
Program Name (Please Specify)		Program Dates	Seas	on Circle	one	Program Fe	ee
			Fall	Winter	Spring/ Summer		
			Fall	Winter	Spring/ Summer		
			Fall	Winter	Spring/ Summer		
						TOTAL:	
Household Information							
Total Number of People in House	hold:						
Please list ALL individuals residing	at your hous	sehold:					
Name	Relatio	nship to Participant	DOB Occupat		cupation	1	



Financial Information

Please enter your **total yearly household income**, prior to deductions. Household income listed should include wages of all working household members (working individuals living under the same roof), welfare payments, pension, social security, child support, and other income as stated on your most recent 1040 Form. Lincoln Parks & Recreation reserves the right to request supporting documents in relation to this financial assistance application.

Yearly Hou	usehold Income:									
Please (please of	LPS Financial Assistance/Determination		ck all financial pro	ograms that you are	e enrolled in: attach documentation enrollment)					
Are you liv	Fuel Assistance Financial support from other agencies Please List ing in subsidized housing: Yes		SNAP EAEDC DTA/TANF	☐ WIC ☐ TAFDC ☐ Other						
Release a	and Signature									
 I authorize the Lincoln Parks & Recreation Department to contact employers, social agencies, housing agencies, etc. in order to verify the information on this application. I understand that the deliberate misrepresentation of the information will disqualify me from consideration for financial assistance. I understand that I will need to reapply for financial assistance each tax year and that the award amount may change based of documentation and federal poverty level scales. I understand that awards do not apply to change fees, or cancellation fees and they are to be paid in full. I understand that if I am applying for a program that can be paid in installments, I will be required to put a credit or debit card on file to be charged on the agreed upon dates. I understand that all household balances must be paid before a household can be considered for financial assistance. I understand that once awarded, the applicant/participant must abide by the agreed upon payment plan in order to remain in the program. I understand that any recipient awarded financial assistance must maintain regular attendance at the program. If unable to participate, the recipient must contact the Parks & Recreation Department as soon as possible. Full payment will be required in participant does not attend or withdraw in accordance with program guidelines. I understand that this application does not assume a spot will be reserved for the participant in any program. I understand that all program requirements and policies must be followed. This includes all required forms, health requirements, waivers, rules, etc. 										
Print Name	9									

Date: ____/___

Applicant Signature _____