

# Care-To-Share Form

Financial assistance is available for youth through 17 years of age interested in participating in Parks & Recreation programs and who reside in the Pullman School District, and Senior Adults 60 years of age and older who reside within the City of Pullman. Care-to-Share is based on a 50% match: one activity enrollment is allowed per person per brochure up to \$20 or 1/2 of the activity fee, whichever is less. To be eligible, you must be receiving assistance through one of the following programs: free school lunches, Food Stamps, Income Assistance AFDC/TANF, energy assistance, medicaid, or subsidized housing (verification needed for assistance to be granted). To apply: mail or bring this completed form with your verification to Pullman Parks & Recreation, 240 SE Dexter, Pullman, WA 99163. Care-to-Share cannot be processed at Pullman Aquatic & Fitness Center. We will notify you within one business day of the amount you are eligible to receive. No program space is guaranteed until actual enrollment into a program.

<b>PAYEE INFORMATION: FILL FORM OUT COMPLETELY (PLEASE PRINT CLEARLY, USING BLUE OR BLACK INK)</b>			
FIRST NAME:		LAST NAME:	
MAILING ADDRESS:		HOME/CELL PHONE:	
CITY:	STATE:	ZIP:	EMAIL:

<b>PARTICIPANT INFORMATION: FILL FORM OUT COMPLETELY (PLEASE PRINT CLEARLY)</b>									
PARTICIPANT'S NAME:	BIRTHDAYS	GENDER	GRADE	ACTIVITY NAME	LOCATION	START DATE	TIME	DAY OF WEEK	FEE
JANE DOE (EXAMPLE)	1/25/09	M/F	2ND	SPORTS CAMP	CITY PLAYFIELD	JUNE 9	3:15PM	MWF	\$35
PLEASE MAKE CHECKS OR MONEY ORDERS PAYABLE TO: CITY OF PULLMAN (DO NOT MAIL CASH)							TOTAL		\$

We are currently receiving one of the following forms of assistance and authorize Pullman Parks & Recreation to verify "Free School Lunch" or we will provide proof of our eligibility for the "Care-to-Share" program.

Parent/Guardian/Participant Signature \_\_\_\_\_

<input type="checkbox"/> FREE SCHOOL LUNCH	<input type="checkbox"/> INCOME ASSISTANCE AFDC/TANF	<input type="checkbox"/> FOOD STAMPS	<input type="checkbox"/> ENERGY ASSISTANCE	<input type="checkbox"/> MEDICAID	<input type="checkbox"/> SUBSIDIZED HOUSING
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FOR OFFICE USE ONLY	
DATE:	AUTHORIZED BY:
LAST RECEIVED:	APPROVE AMOUNT:

## Care-to-Share Check List

- Required:** Participant's Name
- Required:** ALL Participant's Birth Dates
- Required:** Participant's Gender
- Required:** Activity Name
- Required:** Start Date and Time
- Required:** Proof of Eligibility
- Required:** Signed Wavier Form (reverse side)

## Your Donations are needed:

You can help a Pullman Youth or Sr. Adult who would like to participate in our recreation activities by donating to the "Care-to-Share" program for low income families. You may even have a child or Sr. Adult in mind and may want to designate your gift for that particular person. Your business, club, family, or neighborhood may want to use the "Care-to-Share" program as a project. All funds received will go directly to assist those who otherwise may not participate in a Parks & Recreation activity. Donations can be sent to: City of Pullman, Parks & Recreation, 240 SE Dexter, Pullman WA, 99163

\$\_\_\_\_\_amount (specify that your donation is for "Care-to-Share").

☐ I would like to sponsor a youth with this gift.

☐ I would like to sponsor a Sr. Adult with this gift.

☐ I would like to sponsor \_\_\_\_\_with this gift.

Mail to: Parks & Recreation, 240 SE Dexter, Pullman, WA 99163  
E-mail to: recreation@pullman-wa.gov  
Fax to: 509-338-3313