



# WOODRIDGE RECREATION ASSOCIATION



## Financial Assistance Request Form

(Please submit a form for each child)

Woodridge Recreation Association (WRA) is a not-for-profit agency that relies on registration fees to maintain its sports programs. WRA is committed to providing participant opportunity to all residents in the Woodridge school district and surrounding communities regardless of income level.

WRA has limited resources to provide financial assistance for families in need that are willing to agree to the terms and conditions below. This process allows each individual sport to accurately report to the WRA Board of Directors and The United Way how donor funds are being utilized to ensure continued funding.

Coverage will not be 100%. You will be asked to help with the registration cost, volunteer with the sport your child is participating in or volunteer for other WRA sponsored events. To ensure everyone in need has an opportunity to use the resources, please limit your request for assistance to one sport per child per year.

Please provide a brief explanation of your hardship: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check one:

- I am requesting a payment schedule agreeing that full payment will be made by my child's first scheduled game.
- I can pay 50% of the registration fee and will volunteer my time where needed.
- I can pay this portion of the registration fee: \_\_\_\_\_ and will volunteer my time where needed.
- Please contact me to discuss other arrangements and I will volunteer my time where needed.

I, the undersigned, Parent or Guardian of \_\_\_\_\_,  
Name of Child/Participant

Residing at, \_\_\_\_\_,  
Address / City / State / Zip

request financial assistance to help defer the cost for \_\_\_\_\_ registration fees.  
Sport Participating In

By my signature below, I also understand and agree to provide, upon request, details regarding my financial status should it be necessary, to further justify disbursement of these funds.

\_\_\_\_\_  
Parent or Guardian - Print Name

\_\_\_\_\_  
Parent or Guardian - Signature

\_\_\_\_\_  
Date

Your request will be reviewed by the Woodridge Recreation Board and you will be notified of their decision.