



DUBLIN
CALIFORNIA

Youth Fee Assistance Program Application

Complete one (1) application per child:

*Please note: Funding limit is \$200 per applicant, per year, up to a 75% subsidy of the registration fee.

Eligibility Requirements:

The Youth Fee Assistance Program is available to Dublin residents 17-years-old and younger whose household income level meets specific requirements. Please review the Eligibility Verification and Income Limits Worksheet to determine whether you meet the City's requirements.

*Please note: Each year's Income Limits are released in April.

*Qualified applicants will be considered without regard to race, color, ancestry, religion, national origin, sex, age, disability, medical condition or marital status.

Parent/Guardian First Name:

Parent/Guardian Last Name:

Street Address

Address Line 2

City

State/Province/Region

Email:

Postal Zip Code

Daytime Phone:

Relationship to Participant

Father

Mother

Guardian

Other

Participant (Child) First Name

Participant (Child) Last Name

Participant (Child) Birthdate

Number of Adults in Household

Number of Children in Household

Annual Household Gross Income

How did you learn about this program?

- | | | | |
|------------------|--------------|---------------------------|-------|
| Recreation Guide | City Website | Non-Profit Program | Other |
| Online | Marketing | City Facility (In Person) | |

Signature

I hereby certify the annual household income indicated above represents all means of support from employment income and government assistance. *By completing this field, you hereby accept the terms of the above application.

Date

To complete this application, please bring your completed application and one of the following documents to the Dublin Civic Center (100 Civic Plaza Dublin, CA 94568) Monday to Friday from 8:00 am to 5:00 pm.

Accepted Eligibility Verification Documents

A current year's **Letter of Award** for one or more of the following programs:

- o California's Life Line Program
- o Food Stamps (California Advantage or Cal-Fresh)
- o Free/Reduced Lunch Program
- o Medicaid
- o MediCal
- o Subsidized Housing HUD Section 8 Rent Subsidy
- o Temporary Assistance for Needy Families (TANF)
- o Women, Infants and Children Program (WIC)
- o CA State Unemployment Insurance Benefits (If both parents/guardians are unemployed)

OR

- o Previous year's tax return within income limits

***We cannot accept any other form of documentation for the below list.**

Please leave your application and documents with front desk staff to relay to Program Staff. Your application(s) will be reviewed by Program Staff within 7-10 business days and application response will be made via email provided.

**Please note, front desk staff are unable to process applications.*

FOR OFFICE USE ONLY

Date Received: _____

Staff Initials: _____

Date Approved: _____

Expiration Date: _____