



GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Parks and Recreation



APPLICATION FOR REDUCED RATE PROGRAM

- DPR reduced rate program is designed to assist DC residents with fee assistance for camps based on income and family size and the inability to pay regular price for camps.
- The DPR reduced rate program fee assistance allows child/ren to attend camps for 50% or 75% discount of the total cost. Please note: reduced rate does NOT apply to before and after care fees or field trip fees, and does not apply to REC Camps
- Please complete and return application to the Kids, Camps and Co-Op division. No appointment is needed. All documentation must be accompanied with application before fee assistance applications will be processed.
 - Summer Camp Office Hours: Monday 9:30am – 7pm; Tuesday – Friday 9:30am – 5:00pm
 - Address: Columbia Heights Community Center, 1480 Girard St., NW, 4th Floor, Washington, DC 20009
 - Phone number: (202) 671-0372
- Once fee assistance is approved or denied based on eligibility, applicant will be notified immediately and this approved is valid for one summer season only, applicants must re-apply for fee assistance each year to be consider for fee assistance.

DATE SUBMITTED _____

SECTION 1 - GENERAL INFORMATION

Name of Parent/Guardian

 Last Middle Initial

 First Date of Birth (Month / Day / Year)

Address

 Street Apt/Unit #

 City State ZIP Ward

Telephone

(_____) - _____ (_____) - _____
 Home Work or Cell

 Email

Name of Participant(s): You can add up to 2 children, if you need to add more, please attached a duplicate 1st page.

 Last Middle First

 Date of Birth (Month/Day/Year) Gender: Male Female

 Last Middle First

 Date of Birth (Month/Day/Year)

SECTION 2 - REQUIRED DOCUMENTS

You must provide documentation at the time of qualification for the following items:

Proof of Residency (Provide the following):

- Valid DC government issued photo ID
- Pay stub (issued within the last 45 days)
- Utility bill (gas, electric, or water within the last 60 days)
- Unexpired DC Motor Vehicle Registration
- Unexpired lease or rental agreement
- A notarized letter signed by the persons with whom you reside. Letter should include your name, your child(ren), and address, AND two pieces of mail with your current name, address, and date, must accompany a notarized letter.

Proof of Income:

- **2015 or 2016 Income Tax forms (mandatory)**

Or one of the following:

- Current statement of Social Security Administration benefits
- Current statement of Worker's Compensation benefits
- Current statement of Disability benefits
- Current TANF statement
- Child Support statement

INSTRUCTIONS

This Eligibility Worksheet has been provided to assist you in determining whether you are eligible for a DPR Summer Camp Reduced Rate under the current Federal Poverty Guidelines.

Please review the information below and complete the application before coming to register your child in-person. If you need assistance, please contact the DPR Summer Camp Office; see page 4.

ELIGIBILITY CHART

To determine your eligibility, reference your Household Size and Total Annual Household Income from SECTION 3 - INCOME INFORMATION, and find your Household Size and Total Annual Household Income on the table below.

Household size (Parents & Children)	Eligible for a discount of 50% if total annual household income is less than or equal to the following:	Eligible for a discount of 75% if total annual household income is less than or equal to the following:
1	\$21,978	\$15,444
2	\$29,637	\$20,826
3	\$37,296	\$26,208
4	\$44,955	\$31,590
5	\$52,614	\$36,972
6	\$60,273	\$42,354
7	\$67,951	\$47,749
8	\$75,647	\$53,157

Eligibility amounts based upon United States Department of Agriculture, Food and Nutrition Service, Child Nutrition Programs, Income Eligibility Guideline July 1, 2016 – June 30, 2017 Federal Register / Vol. 81, No. 56 / Wednesday, March 23, 2016 / Notices

SECTION 3 – ELIGIBILITY WORKSHEET

- Qualification for a reduce rate is based on family size and annual income reported to the Internal Revenue Service (IRS). Please list all dependent family members reported to the IRS, residing in your household and their relationship to the applicant. An adult, age 18 or over must list his/her own income; unless they are considered a dependent defined by the IRS.
- Use the table below to calculate your **Total Monthly Household Income before taxes**. Attach proof of income documentation for all sources of income listed. See list of examples in Required Documents section.

Name of Family Member 1:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Name of Family Member 2:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Name of Family Member 3:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Name of Family Member 4:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Name of Family Member 5:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Name of Family Member 6:	
Relationship to Participant:	
Monthly Employment Income (before deductions):	\$
Monthly Support Income (Child Support, Alimony, etc):	\$
Monthly Benefits Income (Retirement, Social Security, Unemployment, etc.)	\$
Monthly Income – (TANF)	\$
Total of Monthly Income:	
TOTAL ANNUAL HOUSEHOLD INCOME (Monthly Income x 12):	
HOUSEHOLD SIZE (all persons living in the household):	

SECTION 4 - APPLICANT CERTIFICATION AND SIGNATURE

YOU MUST SIGN THIS APPLICATION. Read the following carefully before you sign. Incomplete applications will not be considered.

I, hereby, acknowledge that I am resident of the District of Columbia, and I have read and understand this application in its entirety, and that the Department of Parks and Recreation may verify the information on the application, and misrepresentation of the information provided may subject me to prosecution under applicable District laws, and I certify that to the best of my knowledge and belief, all of my statements are true, correct, and complete.

I understand that all fees must be paid in full before my child(ren) can attend the DPR summer camp program. Failure to render payment in full at the time of registration may result in program disenrollment of my child(ren).

Printed Name of Applicant

Signature of Applicant (*Please sign in blue or black ink*)

Date (Month / Day / Year)

Please submit this completed application in person to:	Summer Camp Office Office Columbia Heights Community Center 1480 Girard St., NW, 4th Floor Washington, DC 20009-4612	Phone: (202) 671-0372 Fax: (202) 671-2796 Email: dpr.camps@dc.gov Web: http://dpr.dc.gov
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DPR STAFF USE ONLY

Application review by Summer Camp Office: Approval (75% Off) Approval (50% Off) Disapproval

Signature of DPR Office Representative

Date (Month / Day / Year)

TO CREATE A DPR ACCOUNT visit <http://www.asaponlinereg.com/Login.aspx?org=774>

Customer Log-in (email) for DPR Registration System:

Customer Password: If you requested a password reset, please check your inbox or junk mail folder for an email for your password. The sender will be identified as **"SchoolRegistration@asacentral.com"**.

Date (Month / Day / Year)

Notes:

