

P.L.A.Y. Private Leisure Assistance for Youth

Eligibility/Application Form

P.L.A.Y. sponsors youths, 18 years or younger, from financially limited families, in enrichment programs offered by the **Columbus Recreation & Parks Department** by offering grants to those individuals meeting the eligibility guidelines stated below.

- PLAY grants are limited to one grant award per session per applicant up to a maximum allocation of \$20. The applicant will be responsible for any fees above and beyond this amount and will need to be paid at the class site.
- The amount of financial assistance available through PLAY is subject to change on an annual basis. Applications will be verified and kept confidential.

How to apply

- 1) Complete form below.
- 2) **Proof of Eligibility must be provided by the legal guardian and it can be one of the following:**
 - Most recent federal income tax return showing adjusted gross income and number of dependents
 - Copy of your Medicaid/Caresource/Molina health card
 - Copy of your ADC card
 - A letter from child's school verifying he/she receive Free/Reduced school lunch
- 3) Sign and date the application at the bottom of this page.
- 4) Return completed PLAY Application, with proof of eligibility, to your local recreation center staff at the time of class registration.

Please complete the following information (please print):

Circle session requested: Winter Spring Summer Fall I Fall II
(Circle only one of above choices)

Applicants Birth Date: ___/___/___ **Male** ___ **Female** ___

Name of Applicant: _____

Name of Legal Guardian: _____

Mailing Address: _____ **City:** _____ **OH Zip Code:** _____

Phone Numbers: (work) _____ **(home)** _____

Program: _____ **Cost: \$** _____ **Location:** _____

Day(s) program meets: (circle) M T W R F S **Time:** _____ **Starting Date:** ___/___/___

Note: Eligibility does not guarantee you a space in the program.

STAFF: Please circle appropriate form of verification and sign application below:

Recent federal income tax return Medicaid ADC School lunch registration

I certify that the above and attached information is true and complete to the best of my knowledge. I agree, if necessary, to send additional information and documentation to support the above statements. I understand that financial assistance is based on need, but does not automatically guarantee a selection. I further understand P.L.A.Y. participants are randomly selected based on the number of grants available.

Signature of Legal Guardian _____ **Date** ___/___/___

CRPD Staff Signature _____ **Date** ___/___/___



PLAY applications should be submitted along with your child's class registration form at your local recreation center.

