7900 Williston Road, Williston VT 05495
recreation@willistonvt.org 876-1160 www.willistonrec.org

CONFIDENTIAL CONFIDENTIAL CONFIDENTIAL

Financial Assistance Application

HOUSEHOLD INFORMATION: **Today's Date: _____**

Family's Last Name: _____ Home Email: _____

Home Address: _____ Town: _____

Primary Guardian's Name: _____ Phone #: _____

Secondary Guardian's Name: _____ Phone #: _____

Total Number of Family Members in the household: #Adults: _____ #Children: _____

CHILDREN'S INFORMATION: ***(List all children in the family)***

Child's Names (First/Last)	Birthdate	Age	Grade	School

QUESTIONS:

1. Do you have any additional income not shown on your tax return? ☐ No ☐ Yes
   a. If Yes, please list the additional income amounts $ _____ ☐ Weekly ☐ Monthly
   $ _____ ☐ Weekly ☐ Monthly
2. Briefly explain the reason for your request:
   _____
   _____
3. Is your child or family working with a school guidance counselor, social worker, or outside organization we may contact for verification of need if required? ____YES ____ NO
   If Yes, provide contact information: Name: _____ Phone: _____

I attest that all the information in this document is true and correct to the best of my knowledge. I also attest that all income for the family has been reported, and verification documents have been provided. I understand that the Williston Recreation & Parks staff may contact the people that I have listed to verify the information on this application.

Signature: _____ ***Date*** _____

September 2025

Documentation:

The following items must be submitted with this Financial Assistance Form to be considered for assistance:

Federal Income Tax Return - Copy of the first page of your most recent filing.
Registration Form- attached to this application. You must fill out the programs you are asking for assistance.

NOTE:

- **Financial Assistance is available to Williston Residents Only.**
- **A household account needs to be created on the Recreation website- www.willistonrec.org**
- **A new application and financial information need to be submitted annually. Application is valid Jan. 1- Dec. 31 yearly.**
- **To be considered for financial assistance, the application, registration form and Federal Tax Return, must be returned to: *Williston Recreation- 7900 Williston Rd, Williston, VT 05495***

Williston Recreation Registration Form

7900 Williston Road, Williston VT 05495
www.willistonrec.org 876-1160 recreation@willistonvt.org

PARTICIPANT REGISTRATION INFORMATION:

Participant (First & Last)	**Birthdate**	**Grade**	**Program Title**	**Fee**

WAIVER AGREEMENT: In consideration of being permitted to enroll in a Williston Recreation & Parks Program, the undersigned hereby releases the Town of Williston, its elected or appointed officials, instructors, agents, and/or employees, from all liability to the above-named participants for any and all loss of damage or any claim resulting therefrom on account of injury to the participants while participants are engaged in a Williston Recreation & Parks Program. The participants understand that serious accidents occasionally occur in sports-related activities and that participants occasionally sustain serious injuries as a consequence thereof. Knowing the risks, dangers, and unpredictability of such sports-related activities, participants hereby assume full responsibility for the risk of bodily injury while participating in a Williston Recreation & Parks program. The undersigned expressly agrees that this release is intended to be as broad and inclusive as permitted by the laws of the State of Vermont and that if any portion hereof is invalid, the balance shall continue in full force and effect. I hereby give permission to have participants transported by ambulance should the situation so require.
NOTICE: THIS IS A LEGALLY-BINDING DOCUMENT. IF YOU DO NOT COMPLETELY UNDERSTAND THE TERMS OF THIS DOCUMENT, SEEK COMPETENT LEGAL ADVICE.

I have read this document carefully and sign it voluntarily with full knowledge of its significance.

Signature _____ **Date** _____

(The signature of the participant is required, unless under 18 then parent or guardian must sign)