

Este paquete también está disponible en español a su solicitud.

May 31, 2016

Subject 2016/17 Youth Financial Assistance Program

Dear Novato Resident

We are now accepting applications for the 2016/17 Youth Financial Assistance Program (YFAP). The Youth Financial Assistance Program has limited funds and once the funds have been spent, the Youth Financial Assistance Program will continue with discounted programs only. Each approved family will be able to use up to \$150 maximum per household while funds are available, to be used for children under 18 years of age. Once the funds have been depleted, no money will be available, - only the discounted programs will be available. This funding can be used for any youth program, classes, and activities between July 1, 2016 and June 30, 2017. Applications are available at our Novato Gymnastics Center, 950 7th Street, and the Margaret Todd Senior Center, 1560 Hill Road, and online at www.novatofun.org, click on Forms. Proof of residency and income will be required. After your application has been approved, you will be notified and can then register for programs.

To be eligible for the YFAP program, a family must reside within the Novato city limits. In addition, a family must qualify for public assistance, or receive other types of aid such as school lunch assistance, or unemployment, disability or housing benefits, or qualify as low income based on Community Development Block Grant (CDBG) income limits.

CDBG Income Limits

<u>Persons in Household</u>	<u>Income</u>
1	\$65,700
2	\$75,100
3	\$84,500
4	\$93,850
5	\$101,400
6	\$104,950

We are also continuing to offer some of our popular programs at reduced rates for YFAP families. Please find enclosed a list of programs with reduced rates.

Applications will be accepted on a first come, first served basis. Once the available funding has been depleted, no other funding will be allocated. When funds are depleted, YFAP families may continue to register and pay for the listed programs at reduced rates. A waiting list will be established in the event additional funding becomes available later in the year. Applications are available online at www.novatofun.org, then click on Forms. If you are interested in applying for the Youth Financial Assistance Program, fill out the enclosed application and mail it to: Novato Parks, Recreation and Community Services, Attn: YFAP, 922 Machin Avenue, Novato, CA 94945.



THE CITY OF
NOVATO
CALIFORNIA

922 Machin Avenue
Novato, CA 94945
415/899-8900
FAX 415/899-8213
www.novato.org

Mayor
Pat Eklund
Mayor Pro Tem
Denise Athas
Councilmembers
Pam Drew
Josh Fryday
Eric Lucan

Interim City Manager
Cathy Capriola

Or you can drop off the application at one of our customer service centers:

<p>Novato Gymnastics Center 950 Seventh Street Novato, CA 94945</p> <p>415-899-8279 415-897-6395 Fax</p> <p>Monday – Friday 9-4:30pm</p>	<p>Margaret Todd Senior Center 1560 Hill Road Novato, Ca 94947</p> <p>415-899-8290 415-897-0239 Fax</p> <p>Monday – Friday 9-5pm</p>
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If you have any questions, you can contact us at (415) 899-8279, (415) 899-8290, (415) 899-8977 or email: novatofun@novato.org.

Sincerely,



Katie Dunn, Office Assistant II
Parks, Recreation and Community Services
kddunn@novato.org

enclosures: Financial Assistance Application (y una versión en Español)
 Reduced Rates Program List (y una versión en Español)
 Registration Form (y una versión en Español)

CITY OF NOVATO
Parks, Recreation and Community Services Department
FINANCIAL ASSISTANCE APPLICATION
July 2016 – June 2017



Please Print Clearly

Guardian/ Mother's Name _____ Father's Name _____
Physical Address _____ Mailing Address _____
City _____ State _____ Zip _____ Home () _____ - _____
Cell () _____ - _____
Email _____

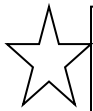
(CHILDREN MUST BE LIVING IN THE SAME HOUSEHOLD) Please include First and Last Name(s):

Child's Name _____ Date of Birth _____ Grade _____ Male/Female _____

Child's Name _____ Date of Birth _____ Grade _____ Male/Female _____

Child's Name _____ Date of Birth _____ Grade _____ Male/Female _____

If you have more than 3 children, please use the back of this form.



PLEASE PROVIDE PROOF OF ADDRESS: Driver's license, California I.D. Card or current utility bill *only*. (Utility bill must be no older than 90 days and show your name and current address, not a P.O. Box.) Utility = water, electric & gas

If you currently receive any of the following, please check:

- Public Assistance (CalWorks, SSI, Food Stamps, General Assistance)
 - Rental Supplement/Assistance School Lunch Assistance
 - In Home Support Services
- Annual Family Income: \$ _____

CDBG Income Limits

Persons in Household	Income
1	\$63,350
2	\$72,400
3	\$81,450
4	\$90,500
5	\$97,700
6	\$104,950

I certify the above information is accurate and true to the best of my knowledge.
I understand that, if necessary, City of Novato employees have the right to request additional information in order to determine my eligibility for Financial Assistance.

Signature _____

Date _____

Office Use below this line.

APPROVED: _____ **DATE** _____

NOTES: _____

Summer/Fall 2016 Reduced Rates Program

PRESCHOOL, CHILDRENS AND TEENS CLASSES						
PROGRAM	LOCATION	GRADES/AGES	DATES	DISCOUNTED PRICE	ACTIVITY CODE	GUIDE PAGE
Tiny Tots, session I	All	3-4 years old	8/29 – 10/7	\$195	varies	8, 9
Tiny Tots, session II	All	3-4 years old	10/10 – 11/18	\$178	varies	8, 9
Tiny Tots, session III	All	3-4 years old	11/28 – 1/20	\$102	varies	8, 9
PreK, session I	All	4-5 years old	8/29 – 10/7	\$298	varies	8, 9
PreK, session II	All	4-5 years old	10/10 – 11/18	\$298	varies	8, 9
PreK, session III	All	4-5 years old	11/28 – 1/20	\$288	varies	8, 9
Taekwondo, all levels	Hamilton Community Center	4-17 years old	8/22 – 10/17	\$100	varies	11, 22, 31
Taekwondo, all levels	Hamilton Community Center	4-17 years old	10/19 – 12/19	\$100	varies	11, 22, 31
Camp Ton-of-Fun, Unlimited	Rancho School Multi Use Rm	1 st – 6 th grades	6/13 – 8/12	\$108	varies	13-14
Camp Ton-of-Fun, PrimeTime	Rancho School Multi Use Rm	1 st – 6 th grades	6/13 – 8/12	\$90	varies	13-14
Camp Ton-of-Fun, Unlimited	Rancho School Multi Use Rm	1 st – 6 th grades	7/5 – 7/8	\$86	varies	13-14
Camp Ton-of-Fun, PrimeTime	Rancho School Multi Use Rm	1 st – 6 th grades	7/5 – 7/8	\$72	varies	13-14
Art Through the Ages & Poetry Writing	Rancho School, Room: TBA	7-11 years old	6/20 – 6/23	\$93	19961	16
Children's Art Adventures	Rancho School, Room: TBA	K – 3 rd grades	6/20 – 6/24	\$72	20468	16
Children's Art Adventures	Rancho School, Room: TBA	K – 3 rd grades	7/11 – 7/15	\$72	20469	16
Fairytale Ballet Camps	Hamilton Community Center	3-5 & 6-8 years old	varies	\$101	varies	25
Junior Chefs Club	Lu Sutton Child Care Room	7-12 years old	varies	\$97	varies	17
Digital Filmmaking Camp, Part 1 & 2	Hamilton School Computer Rm	10-15 years old	All	\$173	varies	28, 29
2D Video Game Design Camp, Part 1 & 2	Hamilton School Computer Rm	10-15 years old	All	\$173	varies	28
SummerStage'16	Hamilton Amphitheater Park	3 rd – 9 th grades	varies	\$280	varies	27
All Sports Camp, Full Day	Hill Gymnasium & Fields	3 rd – 5 th grades	All	\$75	varies	32
All Sports Camp, Half Day	Hill Gymnasium & Fields	3 rd – 5 th grades	All	\$50	varies	32
Jr. All Sports Camp, Full Day	Hill Gymnasium & Fields	K – 2 nd grades	All	\$75	varies	32
Jr. All Sports Camp, Half Day	Hill Gymnasium & Fields	K – 2 nd grades	All	\$50	varies	32
Boys Basketball League	TBA	3 rd – 8 th grades	mid Oct – mid Dec	\$60	varies	35
Girls Basketball League	TBA	3 rd – 8 th grades	early Jan – mid Mar	\$60	varies	35
Flag Football League	Downtown Recreation Center	K – 3 rd grades	begins Sept 1	\$50	varies	36
Arena Flag Football League	Hill Gymnasium	4 th – 8 th grades	early Jan – mid Feb	\$50	varies	36
GYMNASTICS PROGRAMS (Does not include camps)						
All Gymnastics classes, 45 min. classes	Novato Gymnastics Center	varies	all sessions	\$61	varies	44-48
All Gymnastics classes, 55 min. classes	Novato Gymnastics Center	varies	all sessions	\$80	varies	44-48
All Gymnastics classes, 82 min. classes	Novato Gymnastics Center	varies	all sessions	\$100	varies	44-48

These programs and prices are for families in our Financial Youth Assistance program only. An application must be completed and approved prior to registration.



Program Registration Form



Adult/Legal Guardian Information *(Please Print)*

#1 Adult Name: Street _____ City _____ State _____ Zip _____ Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____ E-Mail: _____ <input type="checkbox"/> Do not e-mail me other program information.	#2 Adult Name: Street _____ City _____ State _____ Zip _____ Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____ E-Mail: _____ <input type="checkbox"/> Do not e-mail me other program information.
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Child/Participant Information

Child/Adult Activity Information

Child/Participant's Name Last	Child/Participant's Name First	Child's D.O.B.	M/F	Child's Grade	Class Code #	Activity Name/ Gymnastics Session #	Day/Time	FEE

Financial Assistance Donation for low income: Youth Seniors **Optional \$5.00**

<input type="checkbox"/> Resident - Lives within Novato City limits.	TOTAL \$
<input type="checkbox"/> Non-Resident - Does not live within Novato City limits and/or has a P.O. Box address.	

Yes, I require reasonable accommodations to use City facilities and/or participate in programs.
Please call (415) 899-8279 or (415) 899-8290 to discuss your special needs.

Emergency Contact Information

Name:	Relationship:	Phone: ()
Name:	Relationship:	Phone: ()

Medical Information

Name	Medication	Allergy

COMPLETE and **FAX** both sides of the registration form to either Novato Gymnastics (415) 897-6395, or Margaret Todd Senior Center (415) 897-0239 (credit cards only); or **MAIL** or **BRING** completed registration form to Novato Gymnastics Center, 950 7th St., 415-899-8279, or Margaret Todd Senior Center, 1560 Hill Rd. 415-899-8290.

OFFICE USE ONLY: Date Processed: _____ Receipt # _____ Registrar: _____

Payment Method

Payment by check or money order made payable to "CITY OF NOVATO", or by cash, or credit card (see below).

CHECK/MONEY ORDER CASH MC VISA AMERICAN EXPRESS DISCOVER



IT'S EASY! YOU CAN USE YOUR CREDIT CARD



Card No.: _____ Expiration Date: ____ / ____ / ____

PRINT NAME as it appears on card: _____ Card Security Code: _____

Signature: _____ Date: _____

Liability Waiver/Medical Treatment Consent

(In order for us to process your registration(s), you must sign the Liability Waiver/Medical Treatment Consent after you have read and agreed to the terms. Registrations where the waiver/consent has been altered will not be processed.)

In consideration for my and/or any of my family members' participation in the City of Novato's recreation program(s) that I wish to register for, I voluntarily RELEASE the CITY OF NOVATO, CITY OF NOVATO SUCCESSOR AGENCY TO THE DISSOLVED NOVATO REDEVELOPMENT AGENCY, CITY OF NOVATO PUBLIC FINANCE AUTHORITY AND THEIR RESPECTIVE OFFICIALS, OFFICERS, AGENTS, EMPLOYEES AND VOLUNTEERS (hereinafter referred to as "RELEASEES") from any and all liability for injuries or death or property damage to me and/or my family members resulting from, arising out of, or in any way connected with my and/or any of my family members' participation in the City of Novato's recreation program(s) or use of the RELEASEES' facilities in connection with this/these program(s). I understand that this WAIVER and RELEASE is applicable even though the negligent activities of the RELEASEES may have contributed to the injury or death or property damage suffered by me or any of my family members participating in this/these program(s). I further agree to DEFEND, INDEMNIFY and HOLD HARMLESS the RELEASEES from and against any and all liability, claims, causes of action, and/or losses of any nature or kind (including litigation-related expenses such as attorney and expert witness fees) resulting from, or in connection with, participation in this/these program(s) whether caused by any negligent act or omission of the RELEASEES.

I further understand that serious accidents may occur in the City of Novato recreation program(s) that I am registering for, that participants in this/these program(s) may sustain mortal or serious personal injuries, and/or property damage, as a consequence of their participation in this/these program(s). Knowing the risks of said event, nevertheless, I HEREBY AGREE TO ASSUME THOSE RISKS AND TO RELEASE AND HOLD HARMLESS TO THE FULLEST EXTENT ALLOWED BY LAW ALL OF THOSE PERSONS MENTIONED ABOVE WHO THROUGH PASSIVE OR ACTIVE NEGLIGENCE OR CARELESSNESS MIGHT OTHERWISE BE LIABLE TO ME FOR DAMAGES.

It is further understood and agreed that this waiver, release, hold harmless and indemnification agreement is to be binding on me, any of my participating family members, and all of our heirs, representatives, and assigns.

I hereby authorize qualified physicians to render medical treatment or care that they may deem necessary for me or my family members in case of illness or accident during such program(s). In the event of injury of a child participant, and if a parent cannot be reached, the Novato Fire District will be contacted to transport the injured to Novato Community Hospital or Kaiser Permanente. (Please check one. If none are checked, the injured will automatically be transported to Novato Community Hospital.)

If you do not want your child photographed while participating in our programs or community facilities please send an e-mail indicating this to prcs@novato.org.

By my signature below, I signify that I have read, understand, and voluntarily agree to be bound by each of the terms stated above.

Signature _____ Date _____

Last Name:

Program/Code: