

## Lake Merritt Boating Center /Jack London Aquatic Center 568 Bellevue Ave, Oakland, CA 94610 Phone: 510-238-2196 Fax: 510-238-7199

www.sailoakland.com

## **OPRYD FINANCIAL ASSISTANCE APPLICATION**

FINANCIAL ASSISTANCE IS RESERVED FOR YOUTH RESIDENTS OF OAKLAND WITH DEMONSTRATED FINANCIAL NEED

A ativity Nova	A ativity - Data	A ativity : Fa a	Amazust Danuartad	Cubaidu Ciuan	Dalamas Dua
Activity Name	Activity Date	Activity Fee	Amount Requested	Subsidy Given	Balance Due
			on availability Total:		
Maximum of 1 boating camp scho	olarship per child	per season based	on availability. 10tal.		
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Child's NameFirst		Middle	Last	/ Birth Date	
FIISt		Middle	Last	Birtii Date	Age
Parent/Guardian					
First		Middle	Last	Relationshi	p to Child
Phones			Email		
Home	Work	Cell			
TOTAL Vacely Household	Incomo: ¢		Amount of Assistance	a Daguastadi \$	
TOTAL Yearly Household	шсоше. Б	<del></del>	Amount of Assistance	e Requested. 5_	
Number of Household Mem	bers Supported	by this Income	e:		
WHY DO YOU NEED FIN	ANCIAL ASS	ISTANCE FOR	R THIS PROGRAM?		
v					
XSignature of Parent/Guardia	n		 Date		
Signature of Parent/Guardia	11		Dale		
PLEASE BRING IN OR I	NCLUDE A D	HOTO CODY	OF THE FOLLOW	INC.	
					)
1. Activity Registration Fo				g-registration-tori	<u>II</u> )
2. One of the following to	•			ity on =Othon	
☐ Food Stamp Card/A.F.D.C		-		ity or ⊔Other	
3. One of the following to	•	•			
□California ID Card, □Drive	r's License, ⊔otii	ity bill or ⊔Other_			
Rec'd By:	Date:	_ □ Approved □	Scholarship amount: \$		
•		□ Denied □	Reason/s Denied		
Oakland Besideney sheeked by					
Oakland Residency checked by:					
Proof of need checked by:	(LJFood	Stamp Card/AFDC	⊔w-2 Form ⊔Pay Check St	ub ∐Unemployme	nt ⊔Disability <b>)</b>
Notes:					