

**City of Biddeford  
Recreation Department  
Financial Assistance Application for Recreation Department Programs 2025**

***APPLICATIONS WITHOUT REQUIRED DOCUMENTATION WILL NOT BE ACCEPTED.***

The Biddeford Recreation Department has funding for ***Biddeford residents*** who may qualify for reduced recreation program rates. Programs that would be considered for a reduced fee include Summer Safari or Middle School camp, summer sports camps and youth sports programs. *Cub Care, contractual specialty or enrichment programs, do not qualify for scholarship consideration.*

Financial Aid is granted on a sliding scale based on the 2024 HUD income guidelines.

**We do not give out 100% funding for programs.** Financial Aid provided is 20%- 90% of the program cost, depending on need.

An application is required for financial aid consideration. Required documentation includes:

- You must fill this form out completely. Please put N/A in the spaces that do not apply to your family.
- You must include proof of **all sources** of household income: 3 pay stubs per job and/ or your most recent tax information.
- **You do not need to provide** grocery bills, utility bills etc. Please fill out all items under “household expenses”.

If you need assistance with this form, please contact Lisa Thompson, Recreation Director at 283-0841 or [lisa.thompson@biddefordmaine.org](mailto:lisa.thompson@biddefordmaine.org) All information received is confidential.

Once completed, please return to the Recreation Office. *Incomplete applications will not be considered.* You may mail it to: 189 Alfred St., Biddeford, ME 04005 or email it to: Lisa Thompson, Recreation Director at [lisa.thompson@biddefordmaine.org](mailto:lisa.thompson@biddefordmaine.org).

***Deadline for submitting this application is Monday, March 3, 2025. Applicants applying for camp assistance will be notified by Friday, March 28, 2025 of their FA eligibility.***

**HOUSEHOLD COMPOSITION**

Parent/ Guardian 1	Last	First	Middle	Date of Birth	Telephone Number
Parent/ Guardian 2:	Last	First	Middle	Date of Birth	Telephone Number
Current Physical Address:			Street	Town/City	Zip Code
Email Address ( please write clearly)					
<b>MEMBERS OF THE HOUSEHOLD: (LIST ALL, EVEN IF YOU ARE NOT REQUESTING ASSISTANCE FOR THEM)</b>					
Name		Relationship		Date of Birth	
<b>If a parent(s) is absent from the household please provide the following information:</b>					
Name		Addresses		Telephone Number	Child



**RIGHTS AND RESPONSIBILITIES**

**STATEMENT OF APPLICANT:** I hereby affirm that the facts in this application are true, correct, and complete, and that I have not knowingly withheld any information. I understand that the Administrator has the right to verify any information necessary to determine my eligibility and hereby give my consent. This includes: landlord, employer, Department of Health and Human Services, Social Security, any department of the State and Local Government, and the Park and Recreation Director.

**Deadline for submitting this application is Monday, March 3, 2025, for camp scholarships.**

For applying for assistance for any other program other than summer camp, please submit this form at least 30 days prior to the beginning of the program. ***Receiving aid does not guarantee you a spot in camp or the program requested. You will still need to go through the registration process.***

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date