

The City of Virginia Beach, Department of Parks and Recreation has made some changes to the department's Fee Reduction Policy and Procedures to simplify our process, improve confidentiality, and conform to existing standards already in place with the Department of Human Services.

Effective July 1, 2014, the department will be working directly with the City's Human Services Department to determine participant eligibility. In order to qualify for a reduced fee, applicants must be currently receiving one of the following benefits:

- SNAP (Supplemental Nutrition Assistance Program)
- TANF (Temporary Assistance for Needy Families)
- Section 8 Housing (Government Subsidized Housing Lease)
- SSI (Supplemental Security Income)
- Full Medicaid
- General Relief

Applicants will be required to submit a Reduced Fee Application, a Statement of Benefits or Proof of Full Medicaid Eligibility, and a Public Assistance Programs/Department of Human Services Confirmation Statement. ***Note that effective July 1, 2014, the Department of Parks and Recreation will no longer accept bank statements, tax forms or other documentation to determine eligibility.***

Department of Parks and Recreation programs eligible for a reduced fee to approved Virginia Beach residents include:

- Annual Recreation Center Memberships (Month to Month memberships are not eligible)
- Licensed Early Childhood Programs
- School-Based Out-of-School Time Programs
- Learn to Swim – Levels 1-3 (including Therapeutics)
- Therapeutic Recreation (TR) Camps (including after school programs)
- Safety Camp

**CITY OF VIRGINIA BEACH
DEPARTMENT OF PARKS & RECREATION
REDUCED PRICING APPLICATION**

Date Application Completed: _____

Printed Name of Applicant: _____

Address: _____

City/State: _____ Zip: _____

Phone: Home _____ Work/Emergency _____

<u>LIST ALL Family Members in the Household</u>	<u>Relationship to Applicant</u>	<u>Date of Birth</u>	<u>Requesting Reduced Fee? Indicate Yes or No</u>

Please provide a Statement of Benefit letter with the effective dates which will be used to determine automatic eligibility. A signed Public Assistance Program/DHS Confirmation Statement is required and must be attached to this application. Please circle the current benefit you are receiving from the list below:

- A) SNAP (Supplemental Nutrition Assistance Program)
- B) TANF (Temporary Assistance for Needy Families)
- C) Section 8 (Government Subsidized Housing Lease)
- D) SSI (Supplemental Security Income)
- E) Full Medicaid
- G) General Relief

I certify the information provided above is true to the best of my knowledge and belief. (NOTE: Reduced Fees expire a year from the date of approval and will be no more than 50% of total cost).

APPLICANT'S SIGNATURE

DATE SIGNED

**PUBLIC ASSISTANCE PROGRAM/DHS
CONFIRMATION STATEMENT**

This is to verify that: _____ is eligible for public assistance programs/benefits.
Printed Name of Applicant *

Waiver:

I authorize Human Services to release this information to the City of Virginia Beach Department of Parks and Recreation for the purpose of determining my eligibility for reduced fees.

Applicant's Signature *

Date

* These two areas are required to be filled in by the applicant.

The Following Section Must Be Completed by Department of Human Services Staff:

Please circle current benefit:	SSI	TANF	SNAP	Section 8	Full Medicaid	General Relief
	Other (please specify) _____					
The eligibility period is: _____ to _____.						
The total amount of annual Household Income, including Public Assistance is: _____						
The total number of Family Members living in the Household _____						
_____ Signature and Title				_____ Date		
Print name: _____						
Phone: _____						

For P & R Staff Use Only:

Application Received by: _____

Date: _____

Application Approved by: _____

Date: _____

Application Entered by: _____

Date: _____