

YPCE Financial Hardship Application

The YPCE Financial Hardship program waiver covers fees for selected, eligible YPCE programs for Youth (0-24 years old) residing within Sacramento city limits currently experiencing financial hardship, but who do not qualify for the YPSF Scholarship. Applicants must specify the preferred YPSF Scholarship-eligible program(s) for which they are requesting fee waivers. Applicants who qualify receive a fee waiver for registration and/or membership fees for the programs specified on their application.

- Applications require current proof of residency within Sacramento city limits. (current lease, utility bill dated within the last 60 days, etc.)
- Applicants must submit an Explanation of Financial Hardship.

Eligible Programs

- Aquatics – Swim Lessons, Junior Lifeguard Camps, Swim Teams
- Community Centers – Kids Night Out, Wellness Room Membership, Recreation Explorer Camp (R.E.C.), Teen Scene
- Expanded Learning – Summer Oasis
- Youth Sports – Jr. NBA, NFL Flag Football, Skate Pass

How to qualify for a YPCE Financial Hardship fee waiver:

1. Review the YPSF Scholarship qualifications at <http://www.cityofsacramento.gov/YPSF> to ensure your household does not qualify for the YPSF Scholarship.
2. Create or verify you have an active City of Sacramento ActiveNet account.
3. Complete the YPCE Financial Hardship program waiver application on the following pages or online at <http://www.cityofsacramento.gov/YPSF>
4. Attach or upload required documentation to determine fee waiver eligibility:
 - Applications require current proof of residency within Sacramento city limits. (current lease, utility bill dated within the last 60 days, etc.)
5. Submit your completed application and documentation online **or** send your completed application with documentation to YPSF@cityofsacramento.org
6. Within 21 days, a staff member will notify you of your household's application status and how to register for specified YPCE programs.

Allow up to 21 days for application processing. Applications must be approved and processed, and applicants must be registered for the eligible program, prior to beginning the activity. **Application approval does not guarantee registration in a program. Eligibility for fee waivers must be established every year by meeting eligibility and verification requirements.**

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Are you or any youth in your household currently enrolled in any of the following programs?

- WIC
- CalFresh
- CalWORKS
- TANF
- MediCal

Yes, my household is currently enrolled in one or more of the above listed programs

If yes, your household qualifies for the YPSF Scholarship. Visit <http://www.cityofsacramento.gov/YPSF> to complete an application.

No, my household is not enrolled in any of the above programs.

ActiveNet Account Verification

Do you have a City of Sacramento ActiveNet account?

Yes – continue this application

No – go to <http://www.cityofsacramento.gov/YPSF> to setup your household account with all Family Members listed, then return to this form

Need help creating an ActiveNet account? Contact Sac Recreation at 916-808-6060 or visit your nearest Community Center for assistance.

Contact & Household Information

Head of Household

First Name:

Last Name:

Gender:

Birthdate:

Contact Phone:

Address:

City:

Zip:

Email Address:

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Family Member(s) Information

Family Member #1	
First Name:	Last Name:
Gender:	Birthdate:
Preferred program for fee waiver:	

Family Member #2	
First Name:	Last Name:
Gender:	Birthdate:
Preferred program for fee waiver:	

Family Member #3	
First Name:	Last Name:
Gender:	Birthdate:
Preferred program for fee waiver:	

Family Member #4	
First Name:	Last Name:
Gender:	Birthdate:
Preferred program for fee waiver:	

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Explanation of Financial Hardship
Please describe why you are applying for a fee waiver to cover YPCE program fees. <i>YPCE Staff will evaluate applications on a case-by-case basis.</i>

Authorized Signature	
I attest that all information in this application is true and correct.	
Signature of Head of Household:	Date:

For Internal Office Use Only

Position	Name	Signature	Ext.	Date
Center/Program Supervisor				
Superintendent				
Division Mgr.				
Director				