



Financial Assistance Program

Eligibility and Application: Applicants may request a reduction in program fees for their dependent child or children when a financial need exists. Requests must be made in writing on the attached Financial Assistance Program Application.

Confidentiality: All Financial Assistance Program Applications are public documents that must be made available upon request. However, in the absence of a request to provide this information, Town of Winterville Parks and Recreation staff will keep all information strictly confidential. When providing a copy of your income tax return and pay stub(s), **please black out your social security number.**

Programs and Fees: Applicants who qualify for a fee reduction shall receive financial assistance from the Town for a period of one year, at which time they must re-apply. Applicants may receive no reduction, 50% fee reduction, or 100% fee reduction. Reduction, if any, is applied to each individual program or event fee.

Household Income: Household income is defined as the sum, on an annual basis, of all pay, allowances, financial aid, child support, social services allowances and other income, for the household. You may find this information on line 22 of your 1040 form.

Household Members: Will be verified using your Federal Income Tax Return.

Financial Assistance Eligibility Scale – 2026

Persons in family/household	50% activity fee reduction Max Amount Earned	100% activity fee reduction Max Amount Earned
1	\$23,940	\$15,960
2	\$32,460	\$21,640
3	\$40,980	\$27,320
4	\$49,500	\$33,000
5	\$58,020	\$38,680
6	\$66,540	\$44,360
7	\$58,515	\$50,040
8	\$75,060	\$55,720
For each additional family member add \$5,680		

Verification and Documentation: Financial Assistance Program applicants must provide confirmation of their financial status by providing the Town of Winterville Parks and Recreation Department with a copy of their last year's federal income tax return, along with completed Financial Assistance Program. **Please black out all social security numbers.**

Approval: The Director of Parks and Recreation will review each application and will have final authority to approve or deny the request for financial assistance based on the above criteria.

Restrictions: The Financial Assistance Program cannot be used in conjunction with any other subsidies. The Parks and Recreation Department review of application is based on last year's information. If any household changes occur during the year they will be reflect in the following year.



Financial Assistance Program Application

Application steps:

1. Complete this application. Be sure to include all incomes for your household.
2. Provide verification of financial status and household members. Applicant must provide a copy of last year's federal income tax return. **Please black out all social security numbers.**
3. Mail or bring Financial Assistance Program Application and tax information to the Town of Winterville Parks and Recreation office.

Mailing Address:

Town of Winterville
Parks and Recreation Department
PO Box 1459
Winterville, NC 28590

Physical Address:

Winterville Operations Center
2936 Church Street
Winterville, NC 28590

Name of Dependents in Household	Date of Birth	Age

Total Annual Income for the Household: _____

Head of Households Name (Print): _____

Home Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-Mail: _____

By signing this form, I certify that all of the information on this application is true and correct and that all income is reported. All financial assistance applications are public documents that must be made available upon request. Once approved, financial assistance will be valid for one year.

Head of Household Signature

Date

For Department Use Only

Date Received _____ Verified by _____ ☐ Approved ☐ Denied Percentage _____