### MAYOR THOMAS M. MCDERMOTT, JR.

Presents

## HAMMOND CITY-WIDE YOUTH SPORTS AND RECREATION PROGRAM

Enrollment and activity fees for sports and recreation are paid for by the City of Hammond











Ages 5 to 18

Funds will provide scholarships to low-income youth to participate in city sports leagues who otherwise could not afford to participate.

For further information, please contact

Cynthia Rangel
Dept. of Planning & Development
5925 Calumet Ave., Suite 315
Hammond, IN 46320
rangelc@gohammond.com

Applications will only be taken by appointment. 219-853-6508, ext. 8.

Appointment days are Wednesdays and Thursdays from 9:00 am to 2:30 pm.

City of Hammond Mayor Thomas M. McDermott, Jr. Department of Planning and Development

5925 Calumet Ave., Suite 315, Hammond, IN 46320 – Website: www.gohammond.com Telephone – (219) 853-6508, ext. 8

Fax – (219) 853-6334

Dear Hammond Resident:

Thank you for inquiring about the City-Wide Youth Sports and Recreation Program.

#### **GENERAL INFORMATION:**

Enrollment and activity fees are paid for by the City of Hammond by way of the Department of Planning and Development Community Development Block Grant Program. The city of Hammond will service children between the ages 5-18.

Examples include: T-Ball, Little League, Boxing, Golf, Soccer, Basketball, Football, Cheerleading and other organized sports activities.

#### GUIDELINES:

- All applicants must be residents of the city of Hammond, Indiana for at least 1. 6 months.
- 2. Provide a valid Indiana driver's license for all persons listed as homeowners and a student identification card for all participating youth.
- 3. Applications must meet the income requirements and provide the current Federal Income Tax form.
  - Please Note anyone residing in the household not filing income tax that is retired, receive a pension, social security, or disability benefits, is required to submit:
    - o An award letter from the appropriate agency stating the monthly amount received.
    - In addition, any other supplementary income received such as, child support, alimony, etc. must also be included in the TOTAL household income

#### **INCOME GUIDELINES:**

1 Person	2 People	3 People	4 People
\$36,350	\$41,550	\$46,750	\$51,900
5 People	6 People	7 People	8 People
\$56,100	\$60,250	\$64,400	\$68,550

4. Additional documents are needed to complete application (see attached checklist)

#### CITY-WIDE YOUTH SPORTS RECREATION PROGRAM

#### APPLICATION

#### **Parent Information**

#### DO NOT LEAVE ANY BLANKS.

Last Name	First Name	Mid	dle Initial
Street Address	City, State	Zip	Code
Phone		Email Addr	ess
Social Security Number	,	Annual Hou	sehold Income
No. of Dependent Children Other Dep		ependents	Household Size
Spouse Full Name Circle: Female	Head of Household	Elderly	Disabled
	PARENT/GUARDIA	AN ETHNICITY/	RACE
	nt/Guardian Ethnicity		ne box)
Hispanic		Non-Hispanic	
	Race		Check all that apply
White			
Black/African America	ın		
Asian			
American Indian/Alask			
Native Hawaiian/Other	Pacific Islander		
Asian/White	0 XXII '1		
Black/African America			
American Indian/Alask	an Native & Black Afr	ican American	
Multi-Racial Other			
Ouiti			

#### CITY-WIDE YOUTH SPORTS RECREATION PROGRAM

#### **APPLICATION**

Youth Information	on	
Last Name	First Name	Middle Initial
Current School		City, State, Zip
Current Grade Level	of Youth	
Did your child partici	pate in the Citywide You	th Sports Program in 2016/17? YES NO
Did your child comp	olete the entire season i	n their sport(s)? YES NO
If not please explain	the reason for not con	npleting the season.
What voucher will y	our child need today?	
What sports do you	anticipate your child p	participating in this year?
	ETHNICITY/I	RACE OF YOUTH
IIi	<b>Ethnicity of Youth (P</b>	
Hispanic		Non-Hispanic
	Race	Check all that apply
White		
Black/African Americ	can	
Asian		
American Indian/Alas		
Native Hawaiian/Oth	er Pacific Islander	
Asian/White		
Black/African Americ		
	skan Native & Black Af	rican American
Multi-Racial		
Other		

# CITYWIDE YOUTH SPORTS PROGRAM DEPARTMENT OF PLANNING & DEVELOPMENT CITY OF HAMMOND 5925 CALUMET AVE, SUITE 315 HAMMOND, IN 46320 (219) 853-6508, ext. 8

## INCOME VERIFICATION DO NOT LEAVE ANY BLANKS.

I/We,			herein, declare that
\$		is the	e household income that I/we received ending
the calendar year	of and tha	at the house	hold size, including myself is
I/We were advis	ed that there	is a low-i	ncome requirement for participation in the
Citywide Youth	Sports Program	n. I/We ack	nowledge that the above declared household
income and stater	nent of the hou	sehold size	is true to the best of my/our knowledge.
Date:			Signature
			Address
			City, State, Zip
State of Indiana County of Lake	) ) SS: )		
Subscribed and		pefore me,	a Notary Public this day of
			Notary Public
My commission e	expires:		
Resident of		Count	V

# ALL DOCUMENTS ARE REQUIRED TO ENROLL. PLEASE READ THE CHECKLIST CAREFULLY. FILL OUT THE APPLICATION COMPLETELY.

#### **Checklist of Required Documents for Approval**

The following items must be furnished with your application. If you do not have all of the required documents you will need to reschedule your appointment.

1	Current Mortgage Statement/Payment Book or current lease or Nipsco/Water Bill		
2	2016 Tax Return  * Federal Tax Return  * State Tax Return  * W-2's  (If you file a tax return you must have all 3 to qualify)		
3	Proof of additional supplemental income. <b>Printouts are required.</b> (pension, social security, welfare, child support, etc.)		
4	Valid Indiana Driver's License or State of Indiana identification card		
5	Current Student Identification Card or Current Report Card/Progress Report or Birth Certificate for participating youth.		
6	Last three (3) check stubs		
7	Receipt showing paid fundraiser fees. Required for: Hammond Optimist Youth Sports Northlake Pop Warner Football Hessville Vipers Hermits		
•	y cover a maximum of \$500 for travel teams. The remaining balance bility. No exceptions.		
No vouchers will be g	given without all of the required documents listed above.		
Household Income in	cludes everyone currently living in the home.		
Each child will be lin is depleted.	nited to 5 sports per year under the voucher program or until funding		
	out of a sport will not be eligible to participate in the program and subsequent vouchers.		
The voucher does not	t cover fundraiser fees or parent volunteer hours.		
Yes, I have been a H	Sammond resident for at least 6 months.		
Applicant Signature	<del></del>		

You must be a Hammond resident for at least 6 months in order to qualify.