

# 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](mailto:rangelc@gohammond.com)  
Office: 219-853-7311  
Fax: 219-853-6334

**Applications will only be taken by appointment. 219-853-7311.**  
**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](http://www.gohammond.com)  
 Telephone – (219) 853-7311  
 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:**

1. **All applicants must be residents of the city of Hammond, Indiana for at least 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:
    - 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:**

<b>1 Person</b>	<b>2 People</b>	<b>3 People</b>	<b>4 People</b>
\$40,800	\$46,600	\$52,450	\$58,250
<b>5 People</b>	<b>6 People</b>	<b>7 People</b>	<b>8 People</b>
\$62,950	\$67,600	\$72,250	\$76,900

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.**

<hr/> <b>Last Name</b>	<hr/> <b>First Name</b>	<hr/> <b>Middle Initial</b>
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<hr/> <b>Street Address</b>	<hr/> <b>City, State</b>	<hr/> <b>Zip Code</b>
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<hr/> <b>Phone</b>	<hr/> <b>Email Address</b>
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<hr/> <b>Social Security Number</b>	<hr/> <b>Annual Household Income</b>
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<hr/> <b>No. of Dependent Children</b>	<hr/> <b>Other Dependents</b>	<hr/> <b>Household Size</b>
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**Spouse Full Name**

**Circle:**      **Female Head of Household**      **Elderly**      **Disabled**

## PARENT/GUARDIAN ETHNICITY/RACE

Parent/Guardian Ethnicity (Please check one box)			
Hispanic	<input type="checkbox"/>	Non-Hispanic	<input type="checkbox"/>

Race	Check all that apply
White	
Black/African American	
Asian	
American Indian/Alaskan Native	
Native Hawaiian/Other Pacific Islander	
Asian/White	
Black/African American & White	
American Indian/Alaskan Native & Black African American	
Multi-Racial	
Other	

**CITY-WIDE YOUTH SPORTS RECREATION PROGRAM**

**APPLICATION**

**Youth Information – One form per child.**

\_\_\_\_\_

<b>Last Name</b>	<b>First Name</b>	<b>Middle Initial</b>
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\_\_\_\_\_

<b>Current School</b>	<b>City, State, Zip</b>
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\_\_\_\_\_

**Current Grade Level of Youth**

**Did your child participate in the Citywide Youth Sports Program in 2018/19? YES NO**

**Did your child complete the entire season in their sport(s)? YES NO**

**If not please explain the reason for not completing the season.**

\_\_\_\_\_

**What voucher will your child need today?**

\_\_\_\_\_

**ETHNICITY/RACE OF YOUTH**

Ethnicity of Youth (Please check one box)			
Hispanic	<input type="checkbox"/>	Non-Hispanic	<input type="checkbox"/>

Race	Check all that apply
White	
Black/African American	
Asian	
American Indian/Alaskan Native	
Native Hawaiian/Other Pacific Islander	
Asian/White	
Black/African American & White	
American Indian/Alaskan Native & Black African American	
Multi-Racial	
Other	

**CITYWIDE YOUTH SPORTS PROGRAM  
DEPARTMENT OF PLANNING & DEVELOPMENT  
CITY OF HAMMOND  
5925 CALUMET AVE, SUITE 315  
HAMMOND, IN 46320  
(219) 853-7311**

**INCOME VERIFICATION  
DO NOT LEAVE ANY BLANKS.**

I/We, \_\_\_\_\_ herein, declare that  
\$ \_\_\_\_\_ is the household income that I/we received ending  
the calendar year of 2018 and that the household size, including myself is \_\_\_\_\_.  
I/We were advised that there is a low-income requirement for participation in the  
Citywide Youth Sports Program. I/We acknowledge that the above declared household  
income and statement of the household size is true to the best of my/our knowledge.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

State of Indiana        )  
                                  ) SS:  
County of Lake         )

Subscribed and sworn to before me, a Notary Public this \_\_\_\_\_ day of  
\_\_\_\_\_, 2020.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

Resident of \_\_\_\_\_ County

**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. \_\_\_\_\_ **Proof of Hammond Residency.** Letters will not be accepted.  
One of the following: Mortgage statement, lease, Nipsco or water bill.
2. \_\_\_\_\_ 2018 Tax Return **You must have all 3 to qualify.**
  - \* Federal Tax Return
  - \* State Tax Return
  - \* W-2's
3. \_\_\_\_\_ Proof of additional supplemental income. **Printouts are required.**  
(pension, social security, welfare, child support, etc.)
4. \_\_\_\_\_ Last three (3) check stubs
5. \_\_\_\_\_ Birth Certificate for participating youth. **Only the parent/guardian may apply for the participating youth.**
6. \_\_\_\_\_ Valid Indiana Driver's License or State of Indiana identification card
7. \_\_\_\_\_ Receipt showing paid fundraiser fees. Required for:  
Hammond Optimist Youth Sports  
Northlake Pop Warner Football  
Hessville Vipers  
Hermits

The voucher will only cover a maximum of \$500 for travel teams. The remaining balance is the parent responsibility. No exceptions.

No vouchers will be given without all of the required documents listed above.

Household Income includes everyone currently living in the home.

Each child will be limited to 5 sports per year under the voucher program or until funding is depleted.

Children who drop out of a sport will not be eligible to participate in the program and will be ineligible for subsequent vouchers.

The voucher does not cover fundraiser fees or parent volunteer hours.

**Yes, I have been a Hammond resident for at least 6 months.**

\_\_\_\_\_  
**Applicant Signature**

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