



5647 Broad Street
 GREENDALE, WI 53129
 (414) 423-2790

JACKIE SCHWEITZER
 Director

_____ Summer (due by April 1st)
 _____ Fall (due by August 1st)
 _____ Winter/Spring (due by December 1st)

Date Received: _____ (Office Use Only)

RECREATION ASSISTANCE PROGRAM (RAP) APPLICATION

The Greendale Park and Recreation Department recognizes that some of the residents of the Village of Greendale require financial assistance to attend certain recreational/enrichment activities. The information requested below is confidential and is necessary to help determine the degree of need for each applicant. All information must be filled in or the application will be returned and unaccepted. Upon a completed form being turned in, along with the required information outlined under "How to Apply" under the Policies/Guidelines/Information, your application will be reviewed and you will be notified, in writing, of any decisions (may include an appointment for an interview). Please review the Policies/Guidelines/Information regarding eligibility requirements. The Recreation Assistance Program is open to Village of Greendale residents only.

Please return your completed recreation assistance application form to the Greendale Park and Recreation Office.

PLEASE PRINT

Date: _____

NAME OF CONTACT PERSON (head of household) _____

ADDRESS _____ CITY _____ ZIP _____

DAYTIME PHONE _____ EVENING PHONE _____

EMPLOYER _____ CITY _____

SPOUSE'S NAME (if applicable) _____ CITY _____

FAMILY SIZE: # of Adults in Household _____ # of Children Living at Home _____

DEPENDANTS: List only those under the age of 19.

Name	Birthdate	Gender
1.		
2.		
3.		
4.		
5.		

