



Burlington Recreation Department Center for Human Services * 61 Center St
Mailing Address: Recreation Department * Town Hall * Burlington, MA 01803

The Recreation Department has received your request for financial assistance, and we will do whatever is possible to help you register for the recreation programs of your choice. Here are some of the things you need to know about our financial assistance (“scholarship”) program:

- Please complete the financial assistance form and return it to the Recreation Department as soon as possible.
- Please submit a registration form for the programs you wish to sign up for. Registrations are accepted on a first come-first served basis.
- If we receive your registration form before you turn in your financial assistance form, we will hold spots for you in the programs you select (if there are openings) until we receive the financial from you.
- We normally approve one program per person, unless there is a hardship. If there is a hardship, we will consider providing more than one “scholarship” per person.
- After we receive your financial assistance form, we will notify you as soon as possible to let you know what has been decided.
- If there is a balance due, it is not necessary for you to pay all at once. You may make arrangements for installment payments if you wish.
- Please do not hesitate to call the Recreation Department if you have any questions or if we can help in any way.

Sincerely,

Don Lorinovich
Director of Parks and Recreation

Phone: 781-270-1695
Fax: 781-270-1657
Email: recreation@burlmass.org

BURLINGTON RECREATION DEPARTMENT

FINANCIAL ASSISTANCE



Head of Household _____

Address _____ Telephone _____

Briefly explain why you need financial assistance _____

Names of Participants:

NAME	PROGRAM	ACTIVITY #	FEE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please complete an activity registration form and follow the regular registration procedure. Please write "financial assistance requested" on your form. You will be notified if payment is required.

Total requested \$ _____

Signature of applicant _____

Date _____

For Recreation Department Use

Total approved \$ _____

Explanation

Signature of Recreation Department Official _____

Date