

Submit to: Community Services Department 14000 City Center Drive Chino Hills, CA 91709

STAFF IN

DATE RCV:	
STAFF INITIAL:	

DEADLINE: MARCH 17, 2022

Summer 2023 Scholarship Application

Complete ALL of the following information and attach copies of ALL required documents. Incomplete submittals will NOT be processed. **APPLICANT INFORMATION** (please print neatly or type) Parent/Guardian Name: Address: Attach utility bill for proof of residency. If unable to provide, please explain: Home Phone: (_____) ____ - ____ Work Phone: (_____) ____ - ___ Have you received a Chino Hills Community Foundation Scholarship in the past? ______ If yes, when? _____ Please give a brief statement of reasons for applying for assistance: INCOME Household Size (Number in household) Adults: Children (under 18): Please mark and submit copies of all that apply: ☐ Public Assistance program verification, (Medi-cal – current Notice of Action Letter; CalWorks – current Notice of Action letter, Food Stamps – current Notice of Action letter ☐ SSI (supplemental security income) statement ☐ One month pay stubs ☐ Most Current Tax Return **Total Gross** Social Security/ Unemployment/ All other Cash AID/ Workers Comp Earnings from Retirement **CAL FRESH** monthly Name of adults in household all jobs **Benefits** income

Total

	PARTICIPANT II	NFORMATION	
SUMMER DAY CAMP	PREFERRED LOCAT	ION:	☐ Grand Ave Park
Child's Name: Bay Camp t-shirt size: S	□M □L □XL □AS □A	Age:	
Child's Name: Day Camp t-shirt size:	□M □L □XL □AS □A	Age:	
	WAIVER	FORM	
event/class/activity. I further declagainst any and all claims resulti	nat I am the parent or legal guare and agree that I will indemning from, incident to, or arising for(s) and me above, and/or the	t/Legal Guardian), declare under per ardian of the minor(s) participating ify, defend, and hold harmless the F out of the minor's participation in the e breach of any promises, covenant	in the above-referenced Released Parties from and e event/class/activity, any
injury, death, or property damagagree to assume any such risks Unified School District, the Cour"Released Parties") for any injury participation in the event/class/ac or any other participants in the intended to release any party fround/or statutory provision. In compyself, my heirs, administrators	ye. I hereby acknowledge that I hereby release, discharge a nty Superintendent of Schools y, death, or damage to or loss tivity from whatever cause, includent of company act or omission of "grounsideration for being permitted, executors and assigns, that	r which I am registering exposes r I am voluntarily participating in thind agree not to sue the City of Chin, and all of their employees and/or of personal property arising out of, adding the active or passive negligences to this agreement understand the same subject to participate in the event/class/active I shall indemnify, defend, and hole arising out of or in connection with	s event/class/activity and no Hills, the Chino Valley ragents (collectively, the or in connection with, my ce of the Released Parties hat this document is not ed in applicable case law ctivity, I hereby agree, for d harmless the Released
	of the photographs and video	or agree to have my child profes by the City of Chino Hills for publ	,
I HAVE CAREFULLY READ TH THAT IT IS A FULL RELEASE (ND FULLY UNDERSTAND ITS CO IT ON MY OWN FREE WILL.	ONTENTS. I AM AWARE
Signature:		Date:	