



Application for 2018 Recreational Grant

Application must be completed, all required paperwork included and postmarked by March 23rd, 2018.

Please read all information listed on this application.

Incomplete and/or late applications will not be considered.

Checklist of required paperwork:

- Application form filled out completely
- Proof of Disability signed by treating physician or specialist
- Essay

Basic Information:

Name of applicant : _____

Name of person filling out application: _____ Relation to applicant: _____

Address: _____

City: _____ State: _____ County: _____

Phone Number: (____)____-____ email: _____

Age of applicant: _____ Best way to contact you? _____

Please check ONE recreational activity requested:

Reins of Life (choose a maximum of 2 anticipated sessions) Spring Summer Fall Winter

Camp Millhouse: Overnight Residential Camp or Day Camp (circle one)

Is applicant currently registered at Camp Millhouse? **YES or NO***

**We highly recommend that applicant is registered with Camp Millhouse to ensure applicant is a good fit for camp and that space is available. Camp Millhouse will refund \$150 deposit if applicant is chosen for our scholarship. Please contact Camp Millhouse to register and for further details.*

Other: _____ Cost of requested activity \$ _____

Address, contact person and phone # of organization (if not listed above) _____

(Must be a non-profit 501(c)3 charity organization that supports inclusive sports, camp and/or recreational activity)

Please answer questions below about past participation with this requested recreational activity:

1. Has applicant received a Racing For Steve-O Scholarship in the past? YES or NO
 2. Has applicant applied for 2018 financial assistance with chosen organization? YES or NO
 3. Has applicant ever received financial assistance directly from this chosen activity in the past? YES or NO
 4. Is applicant currently participating or a past participant of requested recreational activity? YES or NO
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Disability Information:

1. Participants disability or special need: _____
 2. **Please attach one of these acceptable forms as “proof of disability”:**
 - Confirmation of Diagnosis, State Form 54727 from Indiana Family & Social Services Administration
 - Physical from MD within the last 12 months stating disability and signed by MD.

**For a complete list of accepted disabilities, please download “Accepted Disability List” from our website*
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Volunteer Information:

Please list volunteer activity of applicant, family and/or legal guardians. *(please attach on separate paper if needed)*
 (Where, when, how long, contact person and phone number to verify volunteer activity)

Essay:

Please describe applicant and why individual would like to participate in this recreational activity, any financial hardships that prevents them from joining, what does the individual hope to achieve from participating, what this activity means to individual, any positive remarks about past participation. *(please attach brief essay on separate paper).*

Income:

1. Does applicant live in a group home? YES or NO If YES, what is their annual disability income? \$ _____
If applicant answered YES, please skip to “Miscellaneous Information” section.
2. Does applicant receive disability income? YES or NO If Yes, what is their annual disability income? \$ _____
3. Is applicant a foster child under your care? YES or NO
 If YES, what is their estimated annual and daily foster child stipend? \$ _____ annual \$ _____ per day
4. How many people (over 18) live in your house? _____
5. How many people (under 18) live in your house? _____
6. Household annual income \$ _____ (Include all wages, unemployment income, disability or other sources of income from entire household)

All blanks must be completed entirely according to directions to be considered for a scholarship award.
All information submitted is confidential and only used by Racing For Steve-O Foundation’s board as one of many factors we consider when determining scholarship award. Financial hardship is not the only factor considered when awarding scholarships. Providing false information will immediately disqualify applicant from receiving scholarship awards now and in the future. For certain circumstances, we may request additional proof of income. Feel free to further describe any outstanding financial situations in your essay.

Miscellaneous Information:

How did you hear about Racing For Steve-O Foundation? _____

Are you available to volunteer at our biggest fundraiser (Barron Lake Triathlon) on August 25th, 2018 in Niles, MI to help support our cause? These grants would not exist without the help of over 100 volunteers needed for this event!

YES or NO

Please read the following entirely to fully understand requirements of application:

The Racing For Steve-O Foundation is ran 100% by volunteers who work hard year round to raise funds to provide these scholarships. **Recipients must be residents of the following counties: Elkhart, Laporte, Marshall, St. Joseph, and Starke counties in Indiana, and Berrien and Cass counties in Michigan.** . All information provided is confidential and securely kept on file with Racing For Steve-O, Inc. We are an equal rights foundation and do not discriminate against applicant's sex, race, ethnicity, sexual orientation, gender identity, religion or political opinions. If recipient is granted a scholarship and does not attend selected activity, then they will be disqualified from receiving any further scholarships or will need to provide a written Dr's note explaining why they were not able to participate. Relatives of board members are eligible for scholarships but must disclose their relationship to the board. Measures will be taken into account to ensure unbiased selection. Racing For Steve-O, Inc accepts no responsibility for any harm, injury or wrongdoing that may occur during any of the selected recreational activity events. Racing For Steve-O, Inc. is a 501(c)(3) non-profit organization as defined by the Internal Revenue Service. Applicant waives any and all claims against the organization arising out of the applicant's participation.

The undersigned has read and agrees to above stated information:

Parent/ Guardian/ Caretaker signature: _____

Dated _____

Mail completed applications to :

Racing For Steve-O
PO BOX 11054
South Bend, IN. 46634

Questions:

The best way to contact us with questions not answered on this application is via our Facebook page. Feel free to send a message and we normally respond quickly. Facebook is our best source for announcements as well as signing up on our website by entering your email address and click "sign up" to receive quarterly newsletters. We are a small group of volunteers and do not have an office staff or employees.

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We will not consider late, emailed or incomplete applications!