

Income Qualified Application Effective Summer 2009 & 2009-2010 School Year

School Age Services*, Summer Camps, Sister Cities High School Student Exchange

Reduced rate programs are available for Columbia residents who live on or work full-time on property subject to the CA assessment and whose household income is within the Columbia Association guidelines. **Reduced rate is not retroactive and is good for fees incurred after the approval date only. All information in this packet must be re-submitted every year.**

1. Name (head of household) _____

Phone Number (home and work) _____

Social Security Number _____

Street Address _____

City _____

State, Zip _____

Annual Gross Income from all sources _____

Family Size _____

INCOME GUIDELINES FOR REDUCED RATE
based on federal guidelines developed by HUD

Family Size	Income Limit Guidelines 50% Reduction	Income Limit Camps 75% Reduction
2	\$51,200	\$26,700
3	\$57,600	\$32,990
4	\$64,000	\$39,270
5	\$69,100	\$45,560
6	\$74,250	\$51,840
7	\$79,350	\$53,020
8	\$84,500	\$54,200

Family Member Name, Birthdate *All dependents listed below must be listed on the tax printout.*

01 _____	05 _____
02 _____	06 _____
03 _____	07 _____
04 _____	08 _____

I wish to apply for the reduced rate for (check all that apply) Summer Camps School Age Services Sister Cities High School Student Exchange
Please allow 8-10 business days for approval for Camps and School Age Services. Call 410-715-3162 for Sister Cities timelines.

2009 PROGRAM	SCHOOL AGE SERVICES	SUMMER CAMPS	SISTER CITIES HIGH SCHOOL STUDENT EXCHANGE
The reduced rates are applicable to	Regular monthly tuition Full Day programs	Camp fees Extended Care fees	Airline tickets Program fees <i>(International Exchange awards will vary according to funds available and number of qualifying applicants)</i>
For more information call	410-715-3164	410-715-3165	410-715-3162

For all programs the reduction in rate is not applicable for the following —

Late payment fees • Late pickup fees • Return check fees • Registration and Application fees

* Reduced rate is available for Howard County residents for School Age Services only, as the programs are held in the public schools.



SUPPORTING DOCUMENTATION

Incomplete packets will be returned causing a delay in processing. Reduced rate is not retroactive and is good for fees incurred after the approval date only. All information in this packet must be re-submitted every year.

- Copies of birth certificates for each child listed as a dependent.
- Income verification
 - Residents of Harper House, Community Homes, Hickory Ridge Place, Longwood, Owen Brown Place, Rideout Heath, Shalom Square, Sierra Woods, and Stevens Forest Apartments may verify income with a letter from his/her resident manager which lists his/her income and names of dependent(s). This information must be stamped, signed or on official letterhead. Applicants who do not live at any of the listed residences, but who receive public assistance, may provide a TCA printout from the Howard County Department of Social Services stamped or signed by DSS.
 - All other applicants must provide an official IRS computer generated transcript of 2008 tax return (it must include the annual income, number of exceptions, and must include the cover letter or be stamped or signed by the IRS). You may request the documents by calling 1-800-829-1040.
- Applicants who do not live on CA assessed property must complete and submit an associate verification form if applicable.
- School Age Services and Camp applicants who currently meet income eligibility guidelines for Department of Social services (DSS) vouchers must first apply to DSS. If DSS services are denied written verification of denial of services must accompany this application. Contact DSS at 410-872-8700 for information on applying for vouchers.
- If the income on the tax return indicates income eligibility for DSS vouchers, but income status has changed, you may submit the most recent pay stubs for the last month as verification of current income instead of denial letter from DSS.
- I understand that approval of this application depends on my ability to comply with the Columbia Association Income Verification Requirements. I will provide an official IRS computer generated transcript of my 2008 tax return. You may request the documents by call 1-800-829-1040. This is the only document that the Columbia Association will accept. There are no exceptions to this requirement.
- I verify that the information I have provided on this application is correct and that the IRS documents are valid. I further agree to notify the Columbia Association should my income rise above the limits stated herein before my approved participation is up. I understand that failure to comply with these requirements will result in revocation of my participation privileges and will require payment at regular rates for privileges already used. I have read and agree to all the provisions on this application.

Signature _____ **Date** _____

Approved (Manager) _____ **Date** _____

Supplying false income tax information is a crime punishable by law. **ID#** _____

COMPLETED APPLICATION with supporting documentation should be mailed to:
Columbia Association • Community Services • 10221 Wincopin Circle • Columbia, MD 21044

- Approved School Age Services 2009-2010 Approved Sister Cities 2009
 Approved Summer Camps 2009 at 50% Approved Summer Camps 2009 at 75%

