

Thank you for your interest!

Please email **two items** to Erin Kaufman, SVAC Manager of Education (ekaufman@svac.org):

1. This form
2. A photo of another document (please see SUPPORTING DOCUMENT, below).

This is a fillable form. You may download it, complete it digitally, save it and then email your saved version.
OR you may print it, complete it on paper, and then email a photo of it.

Once your application is approved, you will be able to register through the SVAC website: when you reach the payment screen, you will see a message that there are funds on your account.

STUDENT/PROGRAM INFO

Class/camp/workshop title:

Start date:

Non-member cost:

Amount household can contribute:

Student's name:

Mailing address:

Phone number:

Email address:

If student is a minor, parent/guardian's name:

If student is a minor, age:

If student is a minor, school:

SUPPORTING DOCUMENT

Please select **any one** of the following and **attach the document** that goes with it:

Please contact Erin in the case of extenuating circumstances not listed (802-367-1306 / ekaufman@svac.org).

- **Various factors make the cost a barrier.**

(Please attach most recent Federal Income Tax Return: 1040 or 1040A and please note which sections are relevant: .)

- **My child(ren) is/are eligible for free/reduced lunch at school.**

(Please attach Meal Time or school district approval letter.)

- **My family receives benefits via the State or Federal Gov't.**

(Please attach ECB's Letter of Decision for Reach Up, 3SquaresVT or Fuel Assistance or equivalent, OR approval from Vermont WIC, TEFAP or Medicaid (Dr. Dynasaur, MCA, MABD, MWD or equivalent.)

COMMITMENT

Intention to participate fully

- I intend (or my family member intends) to participate in all sessions of the program.

Post-program evaluation agreement

- I agree to complete an anonymous evaluation survey after the program.

Signature:

Date:

SVAC Staff Use:

Approval date:

Staff name:

Tuition to be paid: