

Lower Township Children's Fund

What We Do.

The Lower Township Children's Fund is dedicated to enhancing the role of recreation as a positive force in improving the quality of life of youth by investing in youth programs for those who are economically disadvantaged.

Need Help?

If you or someone you know may need the help of the Lower Township Children's Fund, ask a Department of Parks & Recreation staff member for an application form. The forms can also be found in the activities flyers rack. Return the completed form to the Department of Parks & Recreation during regular recreation business hours.

Call (609) 886-7880 or e-mail
recreation@townshipoflower.org for more information.

Get Involved!

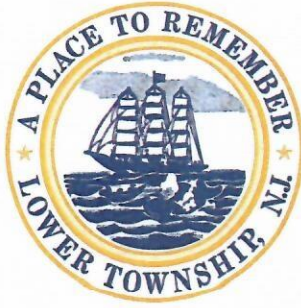
The Lower Township Children's Fund excels with the help of the community. You can help by giving monetary donations or volunteering your time. For more information, please make an appointment with the recreation staff to meet with either the Department of Parks & Recreation Superintendent or Assistant Superintendent.

Thank you!



TOWNSHIP OF LOWER

2600 Bayshore Road
Villas, New Jersey 08251



Incorporated 1798
(609) 886-2005

Application for Children's Assistance Fund

Township of Lower Department of Parks & Recreation

Please Print:

Date / / **Please List Sport or Activity** _____

Student Information: \$150 maximum aid per student

Child's First Name _____ **Last Name** _____

Street Address _____ **City** _____ **Zip** _____

School Name _____

Parent/Guardian Contact Information and Signature:

First Name _____ **Last Name** _____

Street Address _____ **City** _____ **Zip** _____

Phone # () _____

Parent/Guardian #2:

First Name _____ **Last Name** _____

Street Address _____ **City** _____ **Zip** _____

Phone # () _____

Is your child currently enrolled in Free and Reduced Lunch through your school district? **Yes** **No**

If yes, what is your eligibility status: **Free** _____ **Reduced** _____

Certification-please sign below:

Adult #1: I certify the information on this application is true and accurate. _____

Adult #2: I certify the information on this application is true and accurate. _____

If enrolled, please attach proof from your school of Free and Reduced Lunch status along with a brief explanation of your needs.