



Connecting imaginative play with children's ability to succeed throughout life.

Expiration Date:

Family Membership Scholarship Application

The Kid Time! Scholarship program is for families in the Rogue Valley who are receiving public assistance (CHIP, OHP, SNAP, TANF or WIC), licensed Foster Parents and their families, student parents, and to families working with various local non-profits.

6 Month Scholarship Family Membership (\$30) includes: Unlimited admission for the named adults and named children living in the same household; member discounts on birthday parties and Kid Time! events, and a subscription to our monthly e-newsletter.

A **copy** of one of the following eligibility or coverage notification letters with **current dates** is required:

- Foster Parent Certification Letter or a copy of your Foster Parent Card;
- Children's Health Insurance Plan (CHIP), Medicaid, Oregon Health Plan;
- Free and Reduced School Lunch, Food Stamps, WIC;
- Temporary Assistance For Needy Families (TANF);
- Proof of current enrollment in school

A signed and dated letter from a caseworker or official personnel on agency letterhead that includes contact information may also be used to show eligibility.

Applicant Information (please print)

Today's Date: _____

Parent/Guardian: _____

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____ Email: _____

Children (at least one must be under 8 years of age)

Name: _____ Birthday: ____/____/____

Name: _____ Birthday: ____/____/____

Name: _____ Birthday: ____/____/____

Name: _____ Birthday: ____/____/____

Name: _____ Birthday: ____/____/____

Childcare provider/Grandparent (who would bring your children instead of yourself)

List only 2: _____

(Supervising childcare provider must be 18 years or older.)

Household Information

Are you a Foster Family? Yes No Number of foster children in the household: _____

Yearly Household Income: \$ _____ Number of Children in Household: _____

Do dependent child(ren) qualify for: Free Lunch Program or Reduced Lunch Program

Are there any special circumstances we should take into account? _____

How did you hear about the scholarship membership? _____

Membership Terms

Please Initial and Sign

____ I will supervise my child(ren) at all times.

____ I will ensure that my child(ren) follow the "Safe Play Guidelines" posted throughout the facility. (Also available at the Front Desk)

____ I will encourage my child(ren) to clean up after themselves within an exhibit before moving on to other areas.

Kid Time! is your non-profit children's play museum. We are here to provide a safe and exciting place for families to learn and play together. While we are happy to assist in scheduled art activities and story times, we do not have the staffing to supervise children.

Kid Time! reserves the right to revoke memberships at any time due to misconduct or failure to follow membership terms. Memberships are non-refundable and non-transferable. Kid

Time! is not responsible for lost or stolen items.

I have read and agree to follow the membership terms as stated above.

Signature _____ Date: _____

We cannot process your application without your assistance documentation, foster parent documentation or proof of enrollment. Please bring in documentation at the time of purchase for verification by one of our employees. DO NOT turn in original documents! Valid documentation must have a current date or expiration date printed on it. (We will not accept an Oregon Trail/SNAP benefits card without an expiration date as valid documentation.) Thank you for your cooperation.

For Staff Use Only

Expiration Date:

Date: _____

New Member Renewal

Payment Information

Cash Check Credit Amount: \$ _____

Gift Certificate Redeemed # _____ (With admission/discount/other) _____

Card Given

Coupons Given Staff Member: _____

Four Guest Passes Given (one year memberships only)

Initial Entered Into:

POS (all info entered and updated)

Employee Verification of Assistance

Email Database

Scholarship Database