

Fee Waiver/Reduction Application

March 1, 2026 –
February 28, 2027

City of Portland
212 Canco Rd, Suite A
Portland, Maine 04103
Emily Collins (207) 808-5425
ecollins@portlandmaine.gov



PLEASE DO NOT SEND THE REGISTRATION FORM WITH THE FEE WAIVER APPLICATION!!

You must receive a letter of approval before registering for a program.

- Fee waivers or reductions are available for **Portland Residents only**.
- Participants must be 0-17 years old and register for programs between **March 1, 2026–February 28, 2027**.
- Fee waiver applications received without **all** requested information will not be processed and will be returned.

In order to process your fee waiver/reduction application, you must provide **all** of the following:

- The completed Fee Waiver/Reduction form (attached),
- 2025 Federal Tax Return (1040 tax form) **OR** W2 Form (if taxes haven't been filed),
- Last three* recent consecutive pay stubs,
- A copy of a bill which is less than one month old, that shows your current street address (not a PO Box)

In addition, you must provide the following information **if these apply to you**:

- If you receive help from TANIF/ASPIRE, Social Security or Disability etc., please attach a recent statement
- If you receive child support, please attach a copy of the payment schedule.
- Any additional documentation that proves your income.

IF ALL INFORMATION REQUESTED HAS NOT BEEN INCLUDED, WE WILL RETURN YOUR APPLICATION AND INDICATE THE MISSING INFORMATION.

After materials are submitted:

1. You will receive a letter indicating the status of your application within two weeks of submitting *all* material. Receiving a Fee Waiver approval letter does not register you for a program.
2. Upon receiving approval of Fee Waiver, you may THEN submit a registration form for any recreation program that is fee waiver eligible
 - a. You may pay for programs that are not fee waiver eligible or when all fee waiver slots are taken.
 - b. Many of our programs are NOT fee waiver eligible or are limited in the amount of fee waiver slots that are available.
 - c. If all fee waiver slots are taken and you cannot pay, you will be added to a wait list if one has been established for the program.

If you have any questions about the fee waiver application process, please contact Emily Collins (207) 808-5427 or email at ecollins@portlandmaine.gov

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Fee waivers or reductions are available for **Portland Residents only**. If approved, this fee waiver/reduction is valid **March 1, 2026 – February 28, 2027** for participants 0-17 years old.

Primary Parent/Guardian Name: _____

Street Address: _____ Apt#: _____ Zip Code: _____

Mailing Address (if different) _____ Apt#: _____ Zip Code: _____

City of Legal Residence: _____ State: _____

Phone: _____ Email: _____

Secondary Parent/Guardian Name: _____

Street Address: _____ Apt#: _____ Zip Code: _____

Mailing Address (if different) _____ Apt#: _____ Zip Code: _____

City of Legal Residence: _____ State: _____

Phone: _____ Email: _____

Household Living Arrangement: (Check all that apply)

I live: alone with spouse with domestic partner or roommate
 with child(ren) with relatives: *(Please specify Mother, Father, Aunt, etc)*

Household Information: List all persons living in your household.

Your Full Name: _____ Age: _____

Spouse/Partner's Full Name: _____ Age: _____ Relationship: _____

If applicable:

Department of Health & Human Services (DHHS): You must provide a recent statement.

Case Worker Name: _____ Case #: _____

Case Worker Telephone Number: _____

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Household Income: List ALL MONTHLY gross income (before deductions, taxes, etc.) earned or received for each member of your household. **You must report any changes in household income to Portland Recreation.**

Name	Work	TANF/ ASPIRE	Social Security	Child Support	Rental Income	Disability SSI/SSDI	Pension Retirement	Worker's Comp	Unempl- oyment
	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$

Please answer the following and provide copies of supported documentation with this form

Did you or a member of your household file taxes in 2025?(if yes, you must provide a copy of the federal tax form OR W2. Your application will not be considered without proof of residency.)

Yes No

Were you or members of your household employed in 2025?

Yes No

Are you or members of your household currently employed?

Yes No

Are you a Portland Resident? (if yes, you must provide proof of residency such as tax or utility bill with your name and address on it. Your application will not be considered without proof of residency.)

Yes No

I certify that I am a resident of the City of Portland, Maine and that all information is true and correct and that all monthly income and expenses are accurately reported. Furthermore, I authorize the release of information regarding eligibility of this Fee Waiver Application from D.H.H.S. or other official sources.

Signature: _____ Date: _____

Fee waiver applications received without all requested information will not be processed

For security purposes, remove all personal info (i.e. account, phone numbers, etc.) from the documentation prior to submitting. Submitted copies WILL NOT be returned to you.

SUBMIT FORM AND DOCUMENTATION TO: Emily Collins at
ecollins@portlandmaine.gov Or Mail/Drop Off a Portland Parks,
Recreation, and Facilities 212 Canco Road, Suite A