

Fee Waiver/Reduction Application

March 1, 2026 - April 30, 2027

Emily Collins (207) 808-5425

ecollins@portlandmaine.gov

City of Portland

212 Canco Rd, Suite A

Portland, Maine 04103



parks,
recreation
& facilities

Fee Waivers or reductions are available for **Portland Residents only**. If approved, this fee waiver/reduction is valid **March 1, 2026 - April 30, 2027** for participants 0-17 years old.

Primary Parent/Guardian Name: _____ DOB: _____

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

City of Legal Residence: _____ State: _____

Phone: _____ Email: _____

Emergency Contact: _____ 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:

Primary Parent/Guardian: _____ DOB: _____

Secondary Parent/Guardian: _____ DOB: _____ Relationship: _____

Child: _____ DOB: _____ Relationship: _____

Child: _____ DOB: _____ Relationship: _____

Child: _____ DOB: _____ Relationship: _____

Child: _____ DOB: _____ Relationship: _____

If you qualify for any of the following, please submit a verification letter instead of completing the rest of the application. If you'd like to apply for additional assistance, please continue with the application.

- ☐ SNAP - at least 50% Waiver Eligible
- ☐ General Assistance - at least 50% to 100% Waiver Eligible Depending on Income Verification from GA
- ☐ McKinney-Vento (PPS) - 100% Waiver Eligible
- ☐ Family Shelter Resident - 100% Waiver Eligible

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If you do not qualify for the previous programs listed, or if you'd like to apply for additional assistance, please continue with the application and provide 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),
- ☐ A copy of a bill which is less than one month old, that shows your current sheet address (not a PO Box)

Please provide supporting documents in the following 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, and you need further assistance, please contact Emily Collins at 207-808-5425 or ecollins@portlandmaine.gov

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 a 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 waitlist if one has been established for the program.

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. Your application will not be considered without proof of residency) (If you have not filed yet, we will accept your W2 form instead).

☐ 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

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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

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: _____

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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 at Portland Parks, Recreation, and Facilities 212 Canco Road, Suite A

- 'iidha kunt bihajat 'iilaa musaeadat fi altarjamat alshafahiati, yurjaa altawasul mae 'iimili kulinz eabr albarid al'iilikturunii ecollins@portlandmaine.gov 'aw ealaa alraqm 5425-808-207.
- Si vous avez besoin d'une assistance pour l'interprétation linguistique, veuillez contacter Emily Collins à l'adresse ecollins@portlandmaine.gov ou au 207-808-5425.
- Se precisar de assistência com interpretação de idiomas, entre em contato com Emily Collins pelo e-mail ecollins@portlandmaine.gov ou pelo telefone 207-808-5425.
- Haddii aad u baahan tahay caawimaad xagga turjumaadda luqadda ah, fadlan kala xiriir Emily Collins cinwaanka e-mailka ah ecollins@portlandmaine.gov ama lambarka taleefanka 207-808-5425.
- Si necesita asistencia con la interpretación de idiomas, por favor comuníquese con Emily Collins en ecollins@portlandmaine.gov o al 207-808-5425.