

**HANOVER PARK FOUNDATION BOARD MEETING
COMMUNITY CENTER BOARD ROOM & ZOOM CONFERENCING APP
MEETING PHONE # 312-626-6799 MEETING ID: 841 0092 3067 MEETING PASSCODE: 516565
WEDNESDAY, JUNE 29, 2022 7:00 p.m.**

1. CALL MEETING TO ORDER

2. ROLL CALL

3. APPROVAL OF THE AGENDA

4. MATTERS FROM THE PUBLIC

5. FINANCE

- A. **Motion to Approve** - Treasurer's Report (for the period ending May 31, 2022)
- B. **Motion to approve** - Financial Report for Kids at Hope Resource Fair April 23, 2022
- C. **Motion to Approve** – YES Account Update June 22, 2022

6. OLD BUSINESS

- A. Discuss Chairman Elkins Magazine info & HPPD Playbook proposal
- B. Fundraising Opportunities 2022
 - Village Cops Day Movie Night, July 15, 5:30-10:00 p.m. @ Springwood Middle School; 5-8 volunteers needed, popcorn, beverages, candy, chips
 - Fall Fun Fest, September 10, 4:00- 7:00 p.m., sell grilled corn & Taffy Apples
 - Cricket Concessions @ Community Park
 - Other fundraising opportunities
- C. Review YES Program Guidelines & Procedures

7. NEW BUSINESS

- A. **Board Direction** - Belinda Mustafa appointment as HP Parks Foundation Trustee
- B. **Board Direction** – Shawqi Mustafa resignation as HP Parks Foundation Trustee & Appointment as HP Parks Foundation Member
- C. **Board Direction** – Appointment of Task Force Members (2)
- D. **B.A.S.S.E.T.** Education Training for Beverage Alcohol Sellers & Servers – August 10 & November 9, 2022 @ HP Village Police Department, 9:00 a.m. – 1:00 p.m.

8. CORRESPONDENCE

- A. National Association of Park Foundations (NAPF) New Member Benefits info

9. OTHER BUSINESS

- A. Next Quarterly Foundation Board Meeting – Wednesday, September 28, 2022 @ 7:00 p.m. in CC Board Room

10. ADJOURNMENT

**HANOVER PARK PARK FOUNDATION
TREASURER'S REPORT
for period ending: MAY 31, 2022**

Beginning Balance: **\$41,602.69**

Revenues:

Interest earned - March 2022	\$	0.71
Interest earned - April 2022	\$	0.66
Interest earned - May 2022	\$	0.73

Total Revenues	\$	<u>2.10</u>
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Expenses:

Barrington Bank	March Maintenance Fee	\$	7.35
<i>Barrington Bank</i>	April Maintenance Fee	\$	7.35
Barrington Bank	May Maintenance Fee	\$	7.35
National of Park Foundation	Ck #1327 Membership Fees	\$	375.00
Illinois Charity Bureau Fund	Ck # 1328 AG990 Filing 20/21	\$	115.00
Illinois Charity Bureau Fund	Ck # 1329 AG990 Filing 21/22	\$	15.00

Total Expenses	\$	<u>527.05</u>
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Ending Balance: General Account **\$41,077.74**

Respectfully Submitted,

Robert O'Brien
Secretary, Treasurer

Hanover Park Park Foundation
Kids at Hope - 4/23/22
Financial Report

Revenues:

Concession Sales	\$279.00
T-Shirt Sales	\$ 59.00
	<hr/>
	\$ 338.00

Expenses:

Tony's Fresh Market - Chips	\$ 6.65
Pcard (Walmart) - concession food supplies	\$ 133.04
	<hr/>
	\$ 139.69

Net Revenue	<hr/> <hr/>
	\$ 198.31

Account Status
Youth Enrichment Supplement (Y.E.S.) Program
06-22-22

Item	Date	Donation	Deduction	Refund to Account	Running Balance
Starting Balance	8-12-17				\$5,124.04
Summer 2017 Programs			(\$3,607.00)		\$1,517.04
Donation – HP Park Foundation	1-8-18	\$2,000.00			\$3,517.04
Fall 2017 Programs			(\$1,563.00)		\$1,954.04
Donation – HP Park Foundation	3-29-18	\$2,000.00			\$3,954.04
Winter 2018 Programs			(\$2,291.00)		\$1,663.04
Donation – HP Park Foundation	6-25-18	\$2,000.00			\$3,663.04
Spring 2018 Programs			(\$2,159.00)		\$1,504.04
Donation – HP Park Foundation	9-24-18	\$2,000.00			\$3,504.04
Donation – HP Park Foundation	12-17-18	\$4,000.00			\$7,504.04
Summer 2018 Programs			(\$4,464.00)		\$3,040.04
Fall 2018 Programs			(\$2866.00)		\$174.04
Donation – HP Park Foundation	3-25-19	\$3,000.00			\$3,174.04
Winter 2019 Programs			(\$2,778.00)		\$396.04
Spring 2019 Programs			(\$345.00)		\$51.04
Donation – HP Park Foundation	7-5-19	\$3,500.00			\$3,551.01
Summer 2019 Programs			(\$1,985.00)		\$1,566.04
Fall 2019 Programs	12-3-19		(908.00)		\$658.04
Donation – HP Park Foundation	1-27-20	\$3,500.00			\$4,158.04
COVID Program Paused					
Summer 2022 Programs					
Fall 2022 Programs					
Winter 2022 Programs					
Spring 2023 Programs					
ACCOUNT BALANCE TO DATE:					\$4,158.04

Submitted by: Kaleigh Piñones

Total given by HPPF: \$85, 950.00

Changes to YES Assistance Program Proposal

Overview of Current YES Program

Seasonal application process for each family.

Each child receives one recreation program not to exceed \$75.00 per season. If the selected program fee exceeds \$75.00 then the applicant is responsible for the balance at the time of registration.

If the program is less than \$75.00, the money does not roll over for another program.

Programs that are excluded: Birthday Parties, Preschool, Before & After School Club, All Trips and Camp Extended Care Options.

Options for YES Assistance Program

Option 1.A

Yearly application for each family instead of seasonally.

Each child in family receives \$400 a year to use on multiple programs for the entire year. Money expires within that year.

Currently when a family applies all 4 seasons, the amount is \$300 per child for the year.

YES would support all programs with the exception of a Birthday Party Package.

Currently it does not support Preschool and Before & After School Club. With these new changes, families will be able to utilize the YES programs to these programs. The \$400 would be subtracted equally into their 9 monthly bills (\$45/month off).

Option 1.B

Yearly application for each family instead of seasonally.

Each child in family receives \$300 a year to use on multiple programs for the entire year. Money expires within that year.

YES would support all programs with the exception of a Birthday Party Package

Preschool and Before & After School Club would be funded separately from other programs. Parents would receive a discount of 15% off per month. \$33/a month (\$297 for the year) off would be the highest discounted fee based on current fees.

Option 2

Yearly application for each family instead of seasonally.

A discount on programs instead of receiving a monetary amount.

The YES fund will supplement that discount.

25%, 50% and 75% discounts based on income level.

Benefits of updating our YES Program

Providing our residents with low-income more opportunities to participate in Park District Programs.

The programs that cost less will be selected by families approved for YES. Currently they are rarely selected since families feel like they are not getting their full benefit. For example an art class costs \$30 but soccer costs \$80. Parents chose the soccer to utilize the full \$75 versus "losing out" on \$45 had they chosen the art class.

Our programs will be more successful in regards to participation.

Y.E.S.

(Youth Enrichment Supplement)

Financial Assistance Program

Provided by the Hanover Park Park Foundation

The purpose of the Youth Enrichment Supplement (Y.E.S.) program is to make recreation opportunities available to all children who live in Hanover Park or are within the boundaries of the Hanover Park Park District. Funds are available for children 18 years of age or younger of families experiencing financial hardship.

Financial Assistance Eligibility Criteria

Based on available funds, the Hanover Park Park District will attempt to provide financial assistance to those residents who meet the eligibility requirements. The Hanover Park Park District reserves the right to approve full or partial assistance or deny an applicant's request. Financial Assistance funds cannot be utilized for Rentals, Birthday Parties, and Daily Admission or court times at facilities, or Open Gym.

Eligibility Requirements:

- 1) Reside in Hanover Park or within the boundaries of the Hanover Park Park District and;
- 2) Receive general assistance, disability assistance, food stamps, or other pre-qualified governmental aid or;
- 3) is low income (falling within the range outlined by SNAP Guidelines) or;
- 4) has incurred an unusual amount of medical bills that have rendered the family unable to afford the cost of the program.

Financial Assistance Guidelines

1. The Y.E.S. application must be completely filled out and returned with your proof of income and proper documentation.
2. All applicants must submit the following when applying for assistance:
 - a. Proof of residency
 - b. Proof of income
 - c. Any supporting documentation if applicable

- d. Proof of incurred medical bills (if applicable). All applicable copies to be considered must be attached to application, must be dated no more than 6 months previous to application date and must clearly identify the name and address of the applicant.
3. If an applicant is applying under the "incurred an unusual amount of medical bills" criteria, an interview will take place with the Hanover Park Park District YES representative.
4. If an application is approved, each child in the family will receive \$300 towards recreation programs. All assistance expire on April 30 each year. Monies do not roll over into the next year. A new application is required annually in concurrence with the Hanover Park Park District's fiscal year: May 1 through April 30.
5. Applicants must fully utilize the program registered for. Applicants not fully utilizing the program will not be allowed financial assistance in the future. No refunds given.
6. **Please allow 5 business days to process your request.**

FOR OFFICE USE ONLY:

Applicants Last Name: _____

Status: ☐ Approved

☐ Declined (Reason)_____

Signature of approving Representative_____

Date _____

Y.E.S. Application
DUE APRIL 30, 2019

Applications are accepted at the Community Center's main office front desk. You can also mail your application, including copies of required documentation to: Hanover Park Park District, ATTN: Main Office, 1919 Walnut Ave, Hanover Park, IL 60133 or by e-mail to e.goddard@hpparks.org. Submittal of application does not constitute approval. If you have additional questions or need additional information, please contact Estelle Goddard, Front Desk Staff at 630-837-2008 or by email at e.goddard@hpparks.org

Applicant Information

Applicant Name: _____ Date of Birth: _____

Address (City, State, Zip): _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Marital Status: (Select One) ☐ Single ☐ Married ☐ Widowed ☐ Divorced ☐ Separated

Housing Status: (Select One) ☐ Homeowner ☐ Rent ☐ Living w/ family/friends

☐ Other (please describe): _____

Please list names and ages of all dependents in the household including Spouse/Partner

*Dependent's First Name	Dependent's Last Name	Date of Birth	*Grade and Name of School	Relationship to Applicant

*Dependents must be legally defined as such.

*Grade and name of school must be listed for school aged children.

Document Verification

Copies of all documents must be included with application. Applications without required documentation will be returned via USPS.

Residency

Choose One: Option A or B

Option A (please select one item from below)	Option B (please select two items from below)
<input type="checkbox"/> Valid Driver's License with your current address <input type="checkbox"/> Valid State-Issued ID with your current address	<input type="checkbox"/> Voter Registration Card <input type="checkbox"/> Tax bill <input type="checkbox"/> Current Lease <input type="checkbox"/> Vehicle Registration <input type="checkbox"/> Home Phone Bill <input type="checkbox"/> Utility Bill

Income

Choose One: Option A, B or C

Option A	Option B
<input type="checkbox"/> Most recent SNAP/TANF award letter (Note: All dependents listed on page one of this application must also be listed on SNAP/TANF award letter)	<input type="checkbox"/> Most recent Federal tax return (Note: Children must be listed as dependents)
Option C (both sides required)	
Proof of Guardianship (Provide one of each child) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Court ordered letter awarding guardianship <input type="checkbox"/> Student Record	Proof of Income (Provide all available) <input type="checkbox"/> 1 month of paycheck stubs for all qualifying individuals <input type="checkbox"/> Unemployment compensation <input type="checkbox"/> Child support <input type="checkbox"/> Social Security/Disability <input type="checkbox"/> Current bank statement <input type="checkbox"/> Other sources of income

HANOVER PARK DISTRICT
YOUTH ENRICHMENT SUPPLEMENT (Y.E.S.) PROGRAM
Application Form

PARENT/GUARDIAN INFORMATION

Name: _____ Email Address: _____

Address: _____

Home Telephone: _____ Cell Telephone: _____

YOUTH PROGRAMS REQUESTED - *Maximum of \$75.00 per youth

1. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: *\$ _____

2. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: *\$ _____

3. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: * \$ _____

4. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: * \$ _____

5. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: *\$ _____

6. Child's Name _____

Program Name: _____ Program Number: _____

Program Cost: \$ _____ Amount Requested: *\$ _____

BACKGROUND INFORMATION (applicable to all applicants):

Number in Family: _____ Annual Gross Income (before Taxes): _____

Source of Income: _____

General Assistance or other State Assistance #: _____

Caseworker's Name _____ Phone Number: _____

Food Stamps (\$ amount per month _____ Medical Card Number: _____

Other Assistance: _____

FOR LOW INCOME FAMILIES (not applicable to families on governmental aid):

Rent/Mortgage: _____

Utilities: _____ Medical Expenses: _____

Other Debts: _____

Additional categories include: Unusual medical expenses, job loss, other crisis, etc.: _____

APPLICANT'S SIGNATURE: _____ **Date:** _____

RECOMMENDATIONS

Supplement(s): Approved _____ Denied _____ Number of Supplements Awarded: _____

Dollar Amount Awarded: \$ _____

Balance – Applicant's Responsibility: \$ _____

Signed: _____ Date: _____

Gina Mastro-Strickler, Customer Relations Supervisor
Hanover Park Park District

Date: _____

To: _____

**PLEASE READ THIS ENTIRE
LETTER CAREFULLY!**

This is in reply to your request for information regarding financial assistance that can be used towards recreation programs for your child(ren).

In addition to the application form I have enclosed, the following documents are needed to complete your application. Additional documentation may be requested if needed.

1. A copy of your current Driver's License, State ID, or other photo ID showing your name and Hanover Park address.
2. A current utility bill (water, NICOR, ComEd, etc.) showing your name and Hanover Park address. The date on the bill should not exceed 60 days from the Date you present your application.
3. A copy of a document that demonstrates your financial need, e.g. medical card.
4. A completed and signed Park District registration form indicating the name(s) and birth date(s) of your child(ren), and the names and program numbers of the programs that you are requesting for your child(ren).
5. A current Family Information Form, updating your household naming all immediate family members living at your Hanover Park address, including birth dates and grade levels.

Please be aware that a maximum of one program, not to exceed \$75.00 per child per season, is allowed; if the selected program fee exceeds \$75.00, the participant is responsible for the balance at the time of registration. Financial assistance is not available for pre-school, Before/After School Club programs, Dog Obedience classes, birthday parties, camp extended care and trips.

All applications with supporting documentation, must be completed in full before they will be accepted for financial assistance and must be turned in to me, IN PERSON. Applications for financial assistance and documents must not be left at our customer service desks.

Please contact me to set up a time to drop off your application and documents. Feel free to contact me if you have any questions.

Sincerely,

Jeremy Panagakis
Customer Relations Supervisor

YES

Financial Assistance Program

HPPF Logo

Provided by the Hanover Park Park Foundation

The purpose of the Youth Enrichment Supplement (YES) program is to make recreation opportunities available to all children who live in Hanover Park or within the boundaries of the Hanover Park Park District through the participation in the Hanover Park Park District programs and facilities. The funds are available for children 18 or younger of families experiencing financial hardship.

Financial Assistance Eligibility Criteria

Based on the availability of funds, the Hanover Park Park District will attempt to provide financial assistance to those residents who meet the eligibility requirements. The Hanover Park Park District reserves the right to approve full or partial assistance or deny an applicant's request. Financial Assistance funds cannot be utilized for Rentals, Birthday Parties, and Daily Admission or court times at facilities, or Open Gym.

1. Reside in Hanover Park or within the boundaries of the Hanover Park Park District.
2. Receive general assistance, disability assistance, food stamps, or other pre-qualified governmental aid or
3. is low income (falling within the range outlined by HHS Poverty Guidelines **Or do we want to go with the SNAP guidelines? West Chicago does and we ask for that for proof of low income by having them provide that...If YES, I can insert a table that shows the income requirements**) or
4. due to dire circumstances, the family is unable to afford the cost of the program or
5. has incurred an unusual amount of medical bills that have rendered the family unable to afford the cost of the program or
6. **an individual who is directly referred by school staff, social service agencies, churches or community organization, who are aware of the family's needs and can provide verification of such need (do we want to keep this?)**

Financial Assistance Guidelines

1. The Scholarship application must be completely filled out and returned with your proof of income and proper documentation.
2. All applicants must submit the following when applying for assistance:
 - a. Proof of residency
 - b. Proof of income
 - c. Any supporting documentation if applicable
 - d. Proof of dire circumstance(s) or incurred medical bills (if applicable). All applicable copies to be considered must be attached to application, must be dated no more than 6 months previous to application date and must clearly identify the name and address of the applicant.
3. If an applicant is applying under the "dire circumstance" or "incurred an unusual amount of medical bills" criteria, an interview will take place with the Hanover Park Park District YES representative.
4. If application is approved, each child in the family will receive \$300 towards recreation programs. All assistance expire on April 30 each year. Monies do not roll over into the next year. A new application is required annually in concurrence with the Hanover Park Park District's fiscal year: May 1 through April 30.
5. Applicants must fully utilize the program registered for. Applicants not fully utilizing the program will not be allowed financial assistance in the future.
6. **Please allow 5 business days to process your request.**

FOR OFFICE USE ONLY:

Applicants Last Name: _____

Status: ☐ Approved

☐ Declined (Reason) _____

Signature of approving Representative _____

Date _____

Park District logo

YES Application

Applications are accepted at the Community Center's main office front desk. You can also mail your application, including copies of required documentation to: Hanover Park Park District, ATTN:Main Office, 1919 Walnut Ave, Hanover Park, IL 60133 or by e-mail to e.goddard@hpparks.org. Submittal of application does not constitute approval. If you have additional questions or need additional information, please contact Estelle Goddard, Front Desk Staff at 630-837-2008 or by email at e.goddard@hpparks.org

Applicant Information

Applicant Name: _____ Date of Birth: _____

Address (City, State, Zip): _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Marital Status: (Select One) ☐ Single ☐ Married ☐ Widowed ☐ Divorced ☐ Separated

Housing Status: (Select One) ☐ Homeowner ☐ Rent ☐ Living w/ family/friends

☐ Other (please describe): _____

Please list names and ages of all dependents in the household including Spouse/Partner

*Dependent's First Name	Dependent's Last Name	Date of Birth	*Grade and Name of School	Relationship to Applicant

*Dependents must be legally defined as such.

*Grade and name of school must be listed for school aged children.

Document Verification

Copies of all documents must be included with application. Applications without required documentation will be returned via USPS.

Residency

Choose One: Option A or B

Option A (please select one item from below)	Option B (please select two items from below)
<input type="checkbox"/> Valid Driver's License with your current address <input type="checkbox"/> Valid State-Issued ID with your current address	<input type="checkbox"/> Voter Registration Card <input type="checkbox"/> Tax bill <input type="checkbox"/> Current Lease <input type="checkbox"/> Vehicle Registration <input type="checkbox"/> Home Phone Bill <input type="checkbox"/> Utility Bill

Income

Choose One: Option A, B or C

Option A	Option B
<input type="checkbox"/> Most recent SNAP/TANF award letter (Note: All dependents listed on page one of this application must also be listed on SNAP/TANF award letter)	<input type="checkbox"/> Most recent Federal tax return (Note: Children must be listed as dependents)
Option C (both sides required)	
Proof of Guardianship (Provide one of each child) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Court ordered letter awarding guardianship <input type="checkbox"/> Student Record	Proof of Income (Provide all available) <input type="checkbox"/> 1 month of paycheck stubs for all qualifying individuals <input type="checkbox"/> Unemployment compensation <input type="checkbox"/> Child support <input type="checkbox"/> Social Security/Disability <input type="checkbox"/> Current link statement <input type="checkbox"/> Other sources of income

Y.E.S. **(Youth Enrichment Supplement)** **Financial Assistance Program**

HPPF Logo

Provided by the Hanover Park Park Foundation

The purpose of the Youth Enrichment Supplement (Y.E.S.) program is to make recreation opportunities available to all children who live in Hanover Park or are within the boundaries of the Hanover Park Park District through the participation in the Hanover Park Park District programs and facilities. The Funds are available for children 18 years of age or younger of families experiencing financial hardship.

Financial Assistance Eligibility Criteria

Based on the availability of funds, the Hanover Park Park District will attempt to provide financial assistance to those residents who meet the eligibility requirements. The Hanover Park Park District reserves the right to approve full or partial assistance or deny an applicant's request. Financial Assistance funds cannot be utilized for Rentals, Birthday Parties, and Daily Admission or court times at facilities, or Open Gym.

Eligibility Requirements:

Formatted: Font: Bold, Underline

1. Reside in Hanover Park or within the boundaries of the Hanover Park Park District and:-
2. Receive general assistance, disability assistance, food stamps, or other pre-qualified governmental aide or;
3. is low income (falling within the range outlined by HHS Poverty Guidelines Or do we want to go with the SNAP (WHAT IS SNAP) guidelines? West Chicago does and we ask for that for proof of low income by having them provide that...If YES, I can insert a table that shows the income requirements) or;
4. due to dire circumstances, the family is unable to afford the cost of the program or; What defines dire circumstances?
5. has incurred an unusual amount of medical bills that have rendered the family unable to afford the cost of the program or; (DO ME NEED PROOF OR CAN WE EVEN ASK FOR PROOF UNDER HIPPA?)
6. an individual who is directly referred by school staff, social service agencies, churches or community organization, who are awareaway of the family's needs

and can provide verification of such need (do we want to keep this?) HAVE WE RECEIVED SUCH REQUESTS IN THE PAST, IF SO HOW MANY ... IF NONE THEN WE CAN REMOVE IT

Financial Assistance Guidelines

1. The Y.E.S. Scholarship application must be completely filled out and returned with your proof of income and proper documentation.
2. All applicants must submit the following when applying for assistance:
 - a. Proof of residency
 - b. Proof of income
 - c. Any supporting documentation if applicable
 - d. Proof of dire circumstance(s) or incurred medical bills (if applicable). All applicable copies to be considered must be attached to application, must be dated no more than 6 months previous to application date and must clearly identify the name and address of the applicant.
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4. If an application is approved, each child in the family will receive \$300 towards recreation programs. All assistance expire on April 30 each year. Monies do not roll over into the next year. A new application is required annually in concurrence with the Hanover Park Park District's fiscal year: May 1 through April 30.
5. Applicants must fully utilize the program registered for. Applicants not fully utilizing the program will not be allowed financial assistance in the future. DO WE EVER ASK FOR REPAYMENT?
6. **Please allow 5 business days to process your request.**

FOR OFFICE USE ONLY:

Applicants Last Name: _____

Status: ☐ Approved

☐ Declined (Reason) _____

Signature of approving Representative _____

Park District logo

Applications are accepted at the Community Center's main office front desk. You can also mail your application, including copies of required documentation to: Hanover Park Park District, ATTN: Main Office, 1919 Walnut Ave, Hanover Park, IL 60133 or by e-mail to e.goddard@hpparks.org. Submission of application does not constitute approval. If you have additional questions or need additional information, please contact Estelle Goddard, Front Desk Staff at 630-837-2008 or by email at e.goddard@hpparks.org

Applicant Name: _____ Date of Birth: _____

Zip): _____

Email Address: _____

Housing Status: (Select One) ☐ Homeowner ☐ Rent ☐ Living w/ family/friends

Please list names and ages of all dependents in the household including Spouse/Partner

[illegible]

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*Dependents must be legally defined as such.

*Grade and name of school must be listed for school aged children.

Document Verification

Copies of all documents must be included with application. Applications without required documentation will be returned via USPS.

Residency

Choose One: Option A or B

Option A (please select one item from below)	Option B (please select two items from below)
<input type="checkbox"/> Valid Driver's License with your current address <input type="checkbox"/> Valid State-Issued ID with your current address	<input type="checkbox"/> Voter Registration Card <input type="checkbox"/> Tax bill <input type="checkbox"/> Current Lease <input type="checkbox"/> Vehicle Registration <input type="checkbox"/> Home Phone Bill <input type="checkbox"/> Utility Bill

Income

Choose One: Option A, B or C

Option A	Option B
<input type="checkbox"/> Most recent SNAP/TANF award letter (Note: All dependents listed on page one of this application must also be listed on SNAP/TANF award letter)	<input type="checkbox"/> Most recent Federal tax return (Note: Children must be listed as dependents)
Option C (both sides required)	
Proof of Guardianship (Provide one of each child) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Court ordered letter awarding guardianship <input type="checkbox"/> Student Record	Proof of Income (Provide all available) <input type="checkbox"/> 1 month of paycheck stubs for all qualifying individuals <input type="checkbox"/> Unemployment compensation <input type="checkbox"/> Child support <input type="checkbox"/> Social Security/Disability <input type="checkbox"/> Current bank statement <input type="checkbox"/> Other sources of income



Hanover Park
PARK DISTRICT

Member Illinois Association of Park Districts

(630) 837-2468
FAX (630) 837-9720

1919 Walnut Avenue
Hanover Park, Illinois 60133

Date: _____

To: _____

**PLEASE READ THIS ENTIRE
LETTER CAREFULLY!**

This is in reply to your request for information regarding financial assistance that can be used towards recreation programs for your child(ren).

In addition to the application form I have enclosed, the following documents are needed to complete your application. Additional documentation may be requested if needed.

1. A copy of your current Driver's License, State ID, or other photo ID showing your name and Hanover Park address.
2. A current utility bill (water, NICOR, ComEd, etc.) showing your name and Hanover Park address.
3. A copy of a document that demonstrates your financial need, e.g. medical card.
4. A completed and signed Park District registration form indicating the name(s) and birth date(s) of your child(ren), and the names and program numbers of the programs that you are requesting your child(ren) to participate in.
5. A current Family Information Form, updating your household naming all immediate family members living at your Hanover Park address, including birth dates and grade levels.

Please be aware that a maximum of one program, not to exceed \$75.00, per child per season is allowed; if the selected program fee exceeds \$75.00, the participant is responsible for the balance at the time of registration. Additional funding may be available at the time of your registration to assist in paying for programs that exceed \$75.00.

All applications with supporting documentation, must be completed in full before they will be accepted for financial assistance and must be turned in to me, IN PERSON. Applications for financial assistance and documents must not be left at our customer service desks.

Please contact me to set up a time to drop off your application and documents. Feel free to contact me if you have any questions.

Sincerely,

Gina Mastro-Strickler
Customer Relations Supervisor

TO OBTAIN AN APPLICATION OR
FOR MORE INFORMATION ABOUT
THE Y.E.S. PROGRAM.

CONTACT

Gina Mastro-Strickler,

CUSTOMER RELATIONS SUPERVISOR,

HANOVER PARK PARK DISTRICT.

630-837-2468, ext. 121, or

g.mastro_strickler@hnparks.org

Y.E.S.

YOUTH ENRICHMENT SUPPLEMENT

FUNDLED BY



HANOVER PARK
PARK FOUNDATION

FOR THE

Enriching People's Lives!



Hanover Park
Park District

.....
hnparks.org 630.837.2468
1919 Walnut Ave. Hanover Park, IL 60133

MISSION STATEMENT

The mission of the Youth Enrichment Supplement (Y.E.S.) program is to offer children of families experiencing financial hardship an opportunity to participate in recreation programs as a healthy outlet for growth and learning while at the same time promoting fun and a healthy and active lifestyle; establishing such criteria, procedures, and guidelines that directly meet the needs of the community; and conducting screening of applicants in a professional, compassionate manner, respecting the inherent dignity and pride of each applicant while adhering to the established guidelines and criteria.

PURPOSE

The purpose of the Youth Enrichment Supplement (Y.E.S.) program is make recreation opportunities available to all children who live in Hanover Park or within the boundaries of the Hanover Park Park District through participation in Hanover Park Park District programs. The funds are to be available for children age 18 or younger (if 18, child must be enrolled in high school), of families experiencing financial hardship. The funds will be limited. Each child in a qualifying family is eligible to receive one supplement for one program per season. Reapplication may be made at the end of each season, if monies are still available.

ELIGIBILITY CRITERIA

To be eligible for the Y.E.S. program, the following criteria applies:

- a. Reside in Hanover Park or within the boundaries of the Hanover Park Park District.
- b. Receive general assistance, disability assistance, food stamps, or other pre-qualified governmental aid, or,
- c. Is low income (falling within the range outlined by HHS Poverty Guidelines), or,
- d. Due to dire circumstances, the family is unable to afford the cost of the program, or
- e. Has incurred an unusual amount of medical bills that have rendered the family unable to afford the cost of the program, or,
- f. An individual, or family, who is directly referred by school staff, social service agencies, churches, or community organization, who are aware of the family's needs and can provide verification of such need.

GUIDELINES

A. All applicants must submit the following when applying for a supplement:

1. Proof of identification – (driver's license, photo ID, etc.)
 2. Two proofs of address – (driver's license, utility bill, a billing statement, etc.)
 3. Proof of income (for families requesting Y.E.S. based on low income) –preferably a tax return documenting prior year's income (all sources).
 4. Any supporting documentation if applicable—a green card, a food stamp card, and/or a medical care card and any accompanying statements. All documents must be current (no more than 30 days old) and must clearly identify the name and address of the applicant.
 5. Proof of dire circumstance(s) or incurred medical bills (if applicable). All applicable copies to be considered must be attached to application, must be dated no more than 6 months previous to application date and must clearly identify the name and address of the applicant.
- B. If a resident has the proper identification and documentation of current governmental assistance, e.g. a green card, a food stamp card, medical card, etc., the resident is automatically eligible for the maximum allowable supplement required to cover the cost of the program requested as he/she has been pre-qualified.
- C. If a resident is directly referred by individuals listed (Eligibility Requirement Item f.), the resident will automatically be eligible for the maximum allowable supplement required to cover the cost of the program.
- D. If an applicant is applying under the "dire circumstance" or "incurred an unusual amount of medical bills" criteria, an interview may be required between the Customer Relations Supervisor of the Hanover Park Park District and the applicant. All interviews will be scheduled by the Customer Relations Supervisor.
- E. For supplements awarded based on low income only, a sliding scale shall be applied to determine the amount of the award.
- F. A maximum award of one recreation program, not to exceed \$75.00, per child per season is provided under Y.E.S. If the selected program fee exceeds \$75.00, the applicant is responsible for the balance at the time of registration.
- G. Park District programs that will not be funded by the Y.E.S. program include, but may not be limited to, the following:
Birthday Parties, Pre-School, Before/After School Club, Dog & Puppy Obedience Classes
All Trips and Camp Extended Care.

Hanover Park Police Department

B.A.S.S.E.T.

BEVERAGE ALCOHOL SELLERS & SERVERS EDUCATION TRAINING

Village of Hanover Park License #5A-1148512



2022 CLASSES

Wednesday, May 18

Wednesday, August 10

Wednesday, November 9

Instructors: Officer Kevin Pini & Officer Amy Alonzo

Classes are held at the Hanover Park Police Department

2011 Lake Street, Hanover Park, IL 60133

9am-1pm

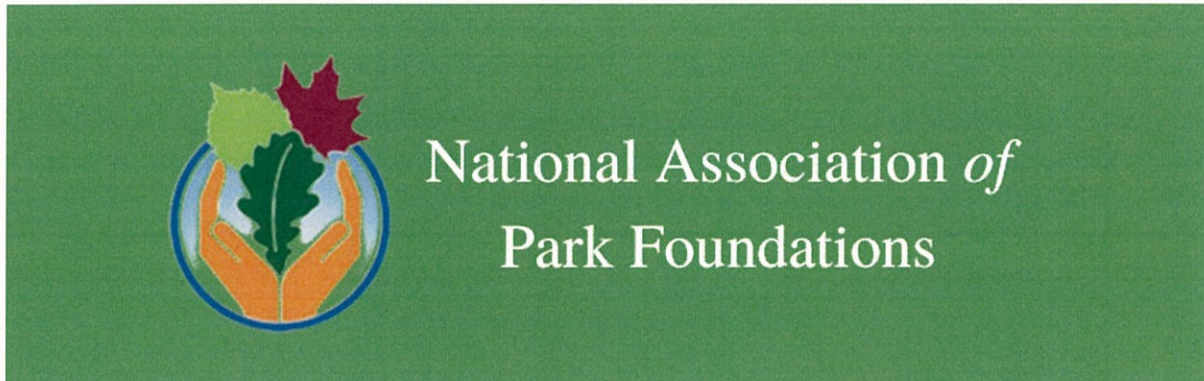
****PRE-REGISTRATION IS REQUIRED****

TO REGISTER, PLEASE CALL 630-823-5481

CLASSES MAY BE SUBJECT TO CHANGE OR CANCELLATION



From: The National Association of Park Foundations <info@the-napf.org>
Sent: Wednesday, June 15, 2022 11:45 AM
To: Bob O'Brien
Subject: Getting To Know Your NAPF Member Benefits Part 1



Hello, Bob,

Thank you again for the renewal of your NAPF membership. NAPF is the only nonprofit organization exclusively dedicated to the park and trail foundation community. Whether you call yourself a friends group, a foundation an alliance or none-of-the-above, membership in NAPF will enhance your public/private non-profit. We'll be breaking the new member packet up into 3 emails. You already received an email about displaying the proud member badge on your website. This week we'll cover the first 3 of 7 primary benefits of membership with The National Association of Park Foundations.

#1 Sign up your whole crew!

If you are the administrator for a group account your membership includes the ability to sign up everyone in your organization to receive access to the members-only content on the website, receive communications about upcoming events and discounted or free participation in NAPF content. Sign into your account and go to your preferences to start adding park and foundation staff and even your volunteer board members. It's all included. Login to your administrator account and select the option to add users.
<https://the-napf.org/Sys/Profile>

#2 Ask a question or make a comment in our online forums

NAPF believes that crowd-sourcing our challenges and experiences will help us all grow to be better nonprofit organizations (and that includes the NAPF). To that end, we have created a forum called [Park Foundation HELP!](#) We can create more forums and will do so as needed. Want to see a particular forum

formed? Reach out to Executive Director, Kevin D. Korenthal at execdir@the-napf.org or (940) 448-0057.

#3: See who else is a member

Members have access to the associations up-to-date membership roster. The database is searchable by state, city, and various keywords. As time goes by, we will add more search elements. Each entry includes the administrator contact for the organization and you are welcome to reach out to them with any non-sales related inquiry you may have.

This is only the beginning! Look forward to another email soon in which we'll talk about even more NAPF member benefits. Please be sure to save these important membership packet emails for future reference.

Reminder! Please remind prospective donors of your affiliation with the NAPF by displaying the Proud member badge as an active link on your website and your social platforms.

[Proud Member Badge.png](#)

Again, thank you for your membership!

Cayce Chenault, Membership Manager

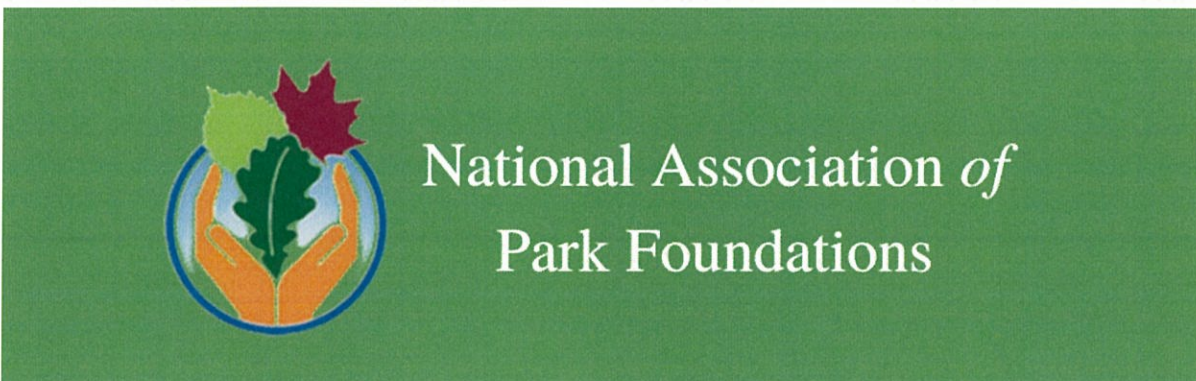
The National Association of Park Foundations
membership@the-napf.org
(262) 207-4107

National Association of Park Foundations
4100 Eldorado Pkwy, Suite 361
McKinney, TX 75070
the-napf.org



[Unsubscribe](#)

From: The National Association of Park Foundations <info@the-napf.org>
Sent: Wednesday, June 22, 2022 11:45 AM
To: Bob O'Brien
Subject: Getting To Know Your NAPF Member Benefits Part 2



Hello, Bob,

Thank you again for the renewal of your NAPF membership. NAPF is the only nonprofit organization exclusively dedicated to the park and trail foundation community. Whether you call yourself a friends group, a foundation an alliance or none-of-the-above, membership in NAPF will enhance your public/private non-profit. This is the 3rd and final email constituting your new member packet. You already received an email about displaying the proud member badge on your website and one talking about the top 3 member benefits that you can take advantage of right now. This week we'll cover the last 4 of 7 primary benefits of membership with The National Association of Park Foundations.

#4: Talk to the Executive Director

Executive Director Kevin D. Korenthal, CAE has over 18 years of association and nonprofit experience and is specifically trained in the management of not-for-profit organizations. He is available by appointment to discuss your questions and needs as it relates to the park and trail foundation space. These calls are a free of charge member service. Email him at execdir@the-napf.org to set an appointment.

#5: Paid Member Benefits/Services

NAPF is dedicated the creating successful park and trail foundations. Sometimes older foundations come to a point in their lifecycle where they need to realign goals, update the mission, ensure best practice financial policies, or completely realign the organization. The park foundation experience is a unique one. You could use any strategic facilitator or finance planner to do this

work with you but partnering with NAPF could improve outcomes and save you valuable time and resources. We are a 501(c)(3) nonprofit corporation, and we provide these services as a paid member benefit. Consider how this may help you get approval to purchase these services. Reach out to Executive Director, Kevin D. Korenthal at execdir@the-napf.org or (940) 448-0057 today for information about these paid member services.

#6 Discounts on products and services

NAPF is planning all kinds of product and service opportunities for members. Members will receive these products and services at a reduced rate. Upcoming products and service offerings will include branded clothing and other items for sale, Park enhancement products and services, discounted or free access to NAPF survey and research results, an NAPF national Conference in 2023 and virtual roundtable discussion forums.

#7: Access to our archive of past webinars, foundation and nonprofit research materials and helpful articles on just about every aspect of the park foundation experience.

The NAPF has been archiving past webinars since day one. Your membership includes access to this content as well as to the archive of research on topics such as fund development, grantmaking, strategic planning and much more.

We hope you are enjoying and taking advantage of your membership with NAPF. If you have any questions, suggestions or even criticisms, please feel free to reach out to me.

Reminder! Please remind prospective donors of your affiliation with the NAPF by displaying the Proud member badge as an active link on your website and your social platforms.

[Proud Member Badge.png](#)

Again, thank you for your membership!

Cayce Chenault, Membership Manager

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