

Who Can Apply?

All children and youth up to 18 years of age who are in need of financial assistance. We serve those who are in the Hampton High School zone. Applications will be considered on a first come, first serve basis.

How to Apply - It's as Easy as 1, 2, 3

1. Choose a community-based program of interest. (Limit of one activity per season)
2. Complete the application form.
3. Return the completed form in person to the Town of Hampton's Leisure Service's office or by mail to:

Paula Kredl
P.R.O. Kids - Confidential
c/o Hampton Community Club
17 Centennial Road, Unit 1
Hampton, N.B.
E5N 6N3

The Reference

Each application requires a reference. The application form describes a reference as someone who is familiar with the situation of the applicant and can verify that the applicant requires assistance from P.R.O. Kids. The reference should be an adult who knows the child, is not a family member, and who is active in community activities. Examples given are: teacher, coach, clergy, social worker, group leader, or co-worker. If the applicant has difficulty finding a reference, the P.R.O. Kids Manager can offer additional suggestions.

Application Information

- Applications are processed in the order in which they are received.
- P.R.O. Kids allows children/youth to access one activity each season – Deadlines: Spring (March 1st), Summer (June 1st), Fall (September 1st) & Winter (December 1st).
- Registration fees cannot exceed \$300 per season. PRO Kids will sponsor up to a maximum of \$600 per year, as funds allow.
- The service is for children/youth who are not participating in other paid recreation programs.
- P.R.O. Kids does not assume responsibility for registering children in activities. The parent/guardian is responsible for registering directly with the identified partner organization once P.R.O. Kids has linked them. If a child is registered in an activity before being approved by P.R.O. Kids, the parent/guardian is responsible for covering any costs associated with that activity until the time of approval.
- P.R.O. Kids does not reimburse parents; payment will be arranged directly with the program offering the activity.
- The parent/guardian is responsible for ensuring that the child attends the program. If for some reason the child can no longer participate, the parent/guardian must contact P.R.O. Kids so another child can fill the space.



Hampton P.R.O. Kids Application

Application Deadline:

March 1st

June 1st

September 1st

December 1st

1. APPLICANT INFORMATION

Name of Child/ Youth: _____ Birth Date: ___dd ___mm ___yy
 Name of Parent / Guardian: _____ Male: ___ Female: ___ Age: ___
 Address: _____ Postal Code: _____
 Telephone (day): _____ Telephone (evening): _____

2. PROGRAM INFORMATION

Activity: _____ Number of weeks: _____
 Number of hours per week: _____ Cost: _____
 Organization offering the activity: _____
 Will you, the applicant, be registered in any other paid recreation program during the season?
 No: ___ Yes: ___ Describe: _____
 Are you able to contribute financially to the program costs? No: ___ Yes: ___
 If yes, please indicate how much you can afford to contribute: \$ _____
 Would you like to volunteer to assist us in fundraising for P.R.O. Kids? No: ___ Yes: ___

3. THIS FORM HAS BEEN COMPLETED BY:

Name: _____ Telephone: _____
 Relationship to Applicant: _____

4. REFERENCE:

Please provide a reference who is familiar with your situation and who can verify that you require assistance from P.R.O. Kids. This person should be an adult who knows the child, is not a family member or friend, and who is active in community activities. (Examples include teacher, coach, clergy, social worker, group leader)

Name of Reference: _____ Email: _____
 Relationship to Reference: _____ Telephone (evening): _____

I, _____, authorize the above reference to release personal information, as required for program placement, to P.R.O. Kids. I further authorize P.R.O. Kids to collect this information. My signature also verifies that financial assistance is required from P.R.O. Kids in order for my child to participate. In addition, I assume full responsibility for the supervision of my child while participating in activities.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Received:			
Date Reference Called:		Verified:	
Date Program Called:		Verified:	
Notes:			

