

Chase Youth Enrichment Fund Application Form

Child's Name: _____ Age/Grade: _____

Parent's Name: _____ Home Phone: _____

Home Address: _____ City/Zip: _____

Email Address: _____

Please give a brief summary of the need, including the exact item or service, the estimated cost, and the reason you are making this request.

Required information for assistance from the Chase Youth Enrichment Fund:

1. List of family members living in the household.
2. Proof of family income.
3. Program fees/costs.
4. Name, phone number and address of the organization.
5. Price quotes from retailers if requesting sporting or musical equipment, etc.

Please email completed form and requested information to
chaseyouthspokane@gmail.com or mail to:

Chase Youth Commission
10 N. Post Street, Suite 649
Spokane WA 99201.

Signature of Parent of Guardian

Date