

WINCHESTER RECREATION DEPARTMENT CHILDCARE FINANCIAL AID REQUEST

The Winchester Recreation Department has a limited amount of financial assistance to offer families registering for Recreation Department Programs. For those looking for Child Care Aid, please see the information below on requirements. The town childcare programs do not accept state childcare vouchers.

Child Care Program Financial Aid Application Policy (WRAP & KID CONNECTION PRESCHOOL)

- Applicant must be working or attending school during the hours of operation of the child care program
- Applications must be renewed yearly with updated required documents.
- Complete applications must be submitted with all required documentation to be considered. *Please do not submit incomplete applications!*
- Applicants must submit the following documentation
 - A copy of the 2026 tax return summary. If household adults have filed separately, all return summaries must be provided.
 - Verification of current work schedule from the employer or school schedule of each adult care provider of the child/ren
 - Four weeks of the most recent pay stubs that includes the number of hours worked in the pay period.

Please note the Income Eligibility table below. If your family falls in any of these boxes you may be eligible for financial aid. To meet the income requirement, your household income must initially be at or below 50% of the state median income (SMI).

Household size	2	3	4	5	6	7	8
Max annual income (before taxes)	\$29, 043	\$35,876	\$42,710	\$50,221	\$56,377	\$60,221	\$61,503

WINCHESTER RECREATION FINANCIAL AID CHILDCARE REQUEST FORM

Winchester Recreation has a limited financial aid fund to assist families. The amount of aid offered to each family will be consistent with Massachusetts EEC voucher funding guidelines, will depend upon the number of qualified applications and will be prioritized based on documented family need. Assistance is offered in the form of reduced tuition.

Participant Name: _____

Age: _____ Date of Birth: _____ Grade on 9/1/26: _____

What program are you seeking to register for?

Program Name: _____

Parent/Guardian Name: _____

Email: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Family size: _____

Number of Dependents: _____

Annual Family Income: _____

Required Documents Submitted:

☐ Copy of your most recent Tax Return Summary (2026)

☐ Current Work or School Schedule

☐ 4 weeks most recent pay stubs

Please include a summary of any extenuating circumstances we should consider:

Parent/Guardian Signature: _____

Please Print Name: _____ Date _____

This request will be reviewed and an official letter of award will be mailed if approval is granted.