

Financial Information Worksheet

Date: _____ Rider Name: _____

Does your rider qualify for WA State Developmental Disability Funds? Yes/No

If yes - Would you like us to bill the state? **Yes/No**
 If yes, skip remainder of form, sign, date & return. If no, continue.

Is your rider over 18 and receive Social Security Disability Income? Yes/No
 If yes - Only use your rider's income with a family size of 1

Is your rider in the Foster Care System? Yes/No
 If yes - Add together your foster care income and your yearly income

What is the number of physician diagnosed individuals with special needs in the home? _____

Financial Aid Calculator Instructions:

Circle your family size.
 In the box to the right of your family size is the maximum income to qualify for financial aid, if your income is below that, please fill in your yearly gross income to the right.
 Your Gross Income can be found on last year's tax form (line 22 on 1040, line 15 on 1040A, and line 6 on 1040EZ) If filing separate add together.
 If you feel that your last year's gross income doesn't accurately represent your current status, you can average your last 3 pay stubs and multiply by 12.

Special Circumstances

If your income is above the maximum and/or you have special circumstances such as large out of pocket medical bills for a family member please explain:

Yearly Gross Income: _____ Explanation: _____

 Average Yearly Out of _____
 Pocket Medical: _____

 (Continue on back if needed.)

If your family isn't interested in applying for Financial Aid or you don't qualify please initial here: _____

Guardian's Name: _____
 Signature: _____
 (I certify accurate reporting of income.)



Financial Aid is made available through the generous support of individuals, businesses, and grant awards. It is our goal to turn no rider away due to inability to pay. Financial Aid is not guaranteed, but we will do everything we can to make therapeutic riding available to all who qualify.

Financial Aid Calculator

| Family Size (Circle your family size) | Maximum Income to Qualify for Financial Aid | Income (Fill in your income if below the maximum) |
|--|---|--|
| 1 | 23,760 | |
| 2 | 32,040 | |
| 3 | 40,320 | |
| 4 | 48,600 | |
| 5 | 56,880 | |
| 6 | 65,160 | |
| 7 | 73,480 | |
| 8 | 81,800 | |

For Official Use Only
 Rider Fee: _____
 Determined by: _____