

FINANCIAL AID APPLICATION

ALL INFORMATION PROVIDED WILL BE HELD IN STRICTEST CONFIDENCE



**JH
TR** | JACKSON HOLE
THERAPEUTIC
RIDING

Complete applications are required to be filed annually and will be applied to sessions after submission. Please allow up to 30 days for the Executive Director to review application.

Name of Participant: _____

Have you applied before? Yes No

Are other members of your family applying for financial aid from JHTR? Yes No

If yes, who? _____

Information requested below applies to Parent/Guardian or Adult Rider.

Name: _____ Phone: _____

Spouse: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Married Single Divorced/Separated Widowed

Number of Children _____ Ages _____ # of people living in home _____

Client resides with: Mother Father Both Parents Guardian Self

FINANCIAL INFORMATION – The Following information is required for financial aid.

Please list all forms of income received on annual basis for the entire household. Mark N/A for any that do not apply to you.

SOURCE	AMOUNT
Employment Wages	
Unemployment Benefits	
Social Security Benefits	
Alimony/Spousal Support (income)	
Child Support (income)	
Welfare/General Assistance	
Medicaid	
Other	
Total Income:	

JHTR | a PATH International Premier Accredited Center

PO Box 415 • Teton Village, WY 83025 • Office: 307.733.1374 • Fax: 307.732.0212 • www.jhtr.org

FINANCIAL INFORMATION CONTINUED

Please check the range that best represents your annual household income:

Less than \$30,000	\$51,000 – \$60,000
\$30,000 – \$40,000	\$61,000 – \$80,000
\$41,000 – \$50,000	\$80,000 and greater

JHTR subsidizes the cost of all lessons through the generous support of donors and grants. The cost to our participants is \$45/Adaptive Riding (AR) & EAL lessons. *Please note that financial aid is not available for OT sessions.*

Please indicate the amount you are you able to pay per lesson:

\$10	\$25	\$35
\$15	\$30	\$40
\$20		

ADDITIONAL INFORMATION

Volunteers play a significant role in the success of programs offered at JHTR. We ask all participant families to volunteer in any way they can. Please check any of the ways that you agree to volunteer.

Barn Chores/Cleaning

Maintenance Assistance

Write Thank You Cards

Volunteer in Lessons

Other: _____

I certify that the information provided in this application is correct to the best of my knowledge.

Signature: _____ Date: _____

For Official Use Only

Reduced Fee: _____ Approved By: _____ Date: _____