



Social Services and Parks and Recreation Department
Sports' Grant

Program Information:

The Town of Medley is committed to promoting healthy and active lifestyles for our youth. Through the Sports' Grant Program, we support families by helping cover the cost of sports and physical activities.

Eligibility Requirements

To qualify for the Sports' Grant, applicants must:

- Be a current and verified resident of the Town of Medley (must remain a resident at the time of each request).
- Be between the ages of 4 and 18.

What Does the Grant Cover?

The program provides financial assistance for:

- Any athletic activity requiring physical skill and of a competitive nature.
- Participation in The Boys and Girls Scouts of America.

Each eligible resident can receive:

- Up to \$200, twice per year, towards the sports program of their choice.

Note: Payment is made directly to the sports organization, not to individuals.

How to Apply

Submit the following documentation at the time of registration:

1. A completed enrollment form from the sports organization or Invoice
2. The Town of Medley's Sports Grant Request Form.

All documents must be submitted to:

Social Services and Parks and Recreation Department



Sports' Grant Request Form

Child's Name: _____

Address: _____ DOB: _____

What sport will your child be participating in? _____

Name and Address of organization: _____

Length of Season: _____ Cost: _____

Parent/Guardian Name: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

The Town of Medley is a public entity that is subject to Florida's Public Records Act. As such, most written communications to or from Town officials regarding Town business, including this application, are public records, and are available to the public and media upon request unless the information requested is exempt or confidential under the law. If you believe any of the information provided in this application is exempt from disclosure under the Public Records Act, please indicate it by filling out the information requested below.

I, _____, qualify for an exemption under the Public Records Act because _____, and, as such, I am requesting that the following information be removed from public disclosure in accordance with Florida law: _____.

I _____, certify that the information I have provided is accurate. I understand that all information will be verified and if it is found that I have knowingly provided false information, all Town of Medley services and privileges will be revoked indefinitely for the entire household.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

☐ Town of Medley's Request Form: _____

☐ Organization's Documentation: : _____

☐ Residency Verification: _____

Grant Received to Date (including current): _____

Processed by & Date: _____

Notes: _____
