

County of San Diego
 Department of Parks and Recreation
 ARPA Youth Sports and Camp Program Application

Organization:		
Authorized Contact:		
Address:		
City:	State:	Zip Code:
Contact Person Phone:	Email:	
Tax ID or EIN:	Website:	
Youth Camp/Sport:	Participant Age Range:	
Start Date:	End Date:	
Number of Anticipated Participants (based on previous year roster):		
Previous Year Registration Cost:	Current/Anticipated Registration Cost:	
Primary Activity Location Address:		
City/Community:	Unincorporated (select one): Yes No	
<u>Please Select the Zip Code of Primary Location of Activity:</u>		
Other(s), please specify: _____		
<p>The Youth Sports and Camp Program is a federally funded grant program that can require additional information/documentation from applicants to assist with reimbursement, tracking, monitoring, and auditing processes. This can include copies of rosters, financials, Tax ID/EIN, etc. Information can be requested at any time.</p>		
Signature:		Date:
Application Checklist		For Parks and Recreation Use Only
<input type="checkbox"/> Tax ID/EIN Verification <input type="checkbox"/> Previous Year Roster <input type="checkbox"/> Previous Year Registration Form w/Cost <input type="checkbox"/> Current Registration Form w/Cost		<input type="checkbox"/> Date Application Received: <input type="checkbox"/> Eligibility Verified: <input type="checkbox"/> HPI Quartile: <input type="checkbox"/> Roster Verified: <input type="checkbox"/> # of Participants: <input type="checkbox"/> Amount Funded: <input type="checkbox"/> Date of Payment 1: <input type="checkbox"/> Date of Payment 2:



Please Email Completed Application To:

YouthSports@sdcounty.ca.gov

