

# TULALIP YOUTH SERVICES

## Universal Funding Request

6406 MARINE DRIVE, TULALIP, WA, 98271 \* FIRST FLOOR OF ADMINISTRATION BUILDING (360) 716-4288

EMAIL: vickihill@tulaliptribes-nsn.gov/drfrberg@tulaliptribes-nsn.gov

YOUTH FULL NAME: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

ENROLLMENT: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

### SCHOOL/ACTIVITY

- ACTIVITY FEE AMOUNT REQUESTING \_\_\_\_\_
- SHOE VOUCHER  ROBERT WAYNE  NIKE  FRED MEYER  BIG 5  FOOTLOCKER  ZUMIEZ
- MATCHING FUNDS \$500 INDIVIDUAL \$1000 FOR TEAM WITH 2 OR MORE TULALIP TRIBAL MEMBERS
- TRAVEL REQUEST AMOUNT REQUESTING \_\_\_\_\_

**\*\*\*REIMBURSEMENT- IF REQUESTING REIMBURSEMENT PLEASE ATTACH ORIGINAL RECEIPT(S)\*\*\***

REIMBURSEMENT MADE OUT TO: \_\_\_\_\_

AMOUNT REQUESTING: \_\_\_\_\_

CIRCLE ONE:      MAILED                      PICK UP

**\*\*\*\*PLEASE ATTACH PROPER DOCUMENTATION\*\*\*\***

**REQUESTS WILL NOT BE PROCESSED UNLESS THIS FORM IS COMPLETELY FILLED OUT BY PARENT OR LEGAL GUARDIAN**

Starting Balance	\$1,000.00
Requested Amount	
Present Balance	

COACH SIGNATURE (IF APPLICABLE) \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

YOUTH SERVICES COORDINATOR \_\_\_\_\_

**YOUR CHILD IS ALLOTTED \$1000 PER YEAR TOWARDS ACTIVITIES OF CHOICE THIS INCLUDES MUSIC , TRAVEL AND SHOE VOUCHERS**