

**The Salle Auriol Fencing Club, dba  
Northwest Fencing Center  
4950 SW Western Avenue  
Beaverton, OR 97005  
(503) 277-2237**



**CONFIDENTIAL REDUCED PRICING APPLICATION**

Name of Fencer: \_\_\_\_\_  
List first initial and last name if a minor

Date of Birth \_\_\_\_\_  
List month & day only if a minor

Address \_\_\_\_\_

Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

E-Mail or Phone Number \_\_\_\_\_



Would you be interested in volunteering at the Northwest Fencing Center (“NWFC”)?

Yes \_\_\_\_ No \_\_\_\_

What talents or services you can provide to support NWFC? \_\_\_\_\_

\_\_\_\_\_

Volunteer your time. It can really make a difference. You can sign up for most volunteer opportunities at the front desk or by sending an e-mail to [front.desk@nwfencing.org](mailto:front.desk@nwfencing.org).



How many people are in your household? \_\_\_\_\_

What is your average household monthly income? \_\_\_\_\_.

Are you anticipating any change in your income in the next six months? If so, specify below:

Applicant is directed to complete the attached addendum.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Please legibly and fully complete this form and the required addendum and return to the Northwest Fencing Center, c/o Scholarship Committee, 4950 S.W. Western Avenue, Beaverton, OR 97005. The Committee will notify you of their decision within 30 days of receiving this form.

## NWFC REDUCED PRICING POLICY

To qualify for reduced pricing, applicant must qualify for the federal free and reduced lunch programs and must otherwise be eligible under the following income guidelines:

Household Size	Federal poverty guideline (7/1/17 to 6/30/18)	185% of Poverty Guideline	Monthly Amount of 185% of Guideline
1	12,060	22,311	1,859
2	16,240	30,044	2,504
3	20,420	37,777	3,148
4	24,600	45,510	3,792
5	28,780	53,243	4,437
6	32,960	60,976	5,081
7	37,140	68,709	5,726
8	41,320	76,442	6,370
Add for each additional family member	4,180	7,733	644

Class sizes are limited. As such, requests will be processed on a first-come, first-served basis. Submission of a request form is in no way a guarantee that reduced pricing will be granted. Requests will be held in the strictest confidence.

Submission of an application authorizes the Scholarship Committee to verify the information contained therein and to confirm that the income requirements and the eligibility for the federal free and reduced lunch programs have been met.

# NWFC REDUCED PRICING PROGRAM

## Addendum to Confidential Reduced Pricing Application

Name of Applicant: \_\_\_\_\_  
(list first initial and last name if applicant is a minor)

Is applicant or any member of his or her immediate family a:

- Foster Child       Homeless Person       Migrant Worker       Runaway

For every household member with income, please denote the type of income with a checkmark below:

Name & Relationship to Child	Wages	Self-Employment Earnings	Pension & Retirement Income	Government Assistance (e.g. Disability, SSI, SNAP, TANF, etc.)	All Other Income
(Example) Jane Doe Mother	√				
(Example) John Doe Grandfather			√		

Please indicate which fencing class you are applying for (in some instances you may be checking more than one box):

Youth 1:  Twice a week (\$100/month)       Once a week (\$68/month)

Adult 1:  Twice a week (\$100/month)       Once a week (\$68/month)

Homeschool:  \$68/month