

(PLEASE USE BLACK OR BLUE INK ONLY)

**Puyallup Tribe of Indians
ADULT ACTIVITIES SUPPORT SERVICES
APPLICATION FORM**

3009 EAST PORTLAND AVENUE – TACOMA, WA 98404

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PURPOSE

The intent of the Adult Activities Support Services Program is to aid Tribal member adults with Monetary assistance for 1) Participation in an organized adult sports team. **ALL SPORTS TEAMS MUST HAVE 5 OR MORE PLAYERS TO BE ELIGIBLE FOR PAYMENT FOR TOURNAMENT FEE'S.** 2) Other Activates: martial arts, health club membership, Native American arts registration fees only. (As of June 2023, the cost of basket weaving kits will not be reimbursed) **Qualified exercise equipment (One time only).** **The program does not REIMBURSE for fees. THIS IS FOR FY OCT 2023-2024 ONLY.**

NAME: _____

FIRST MI LAST (MAIDEN)

ADDRESS: _____ **CITY:** _____ **ST:** _____ **ZIP:** _____

PHONE NUMBER: _____ **DOB:** _____ **ENROLLMENT #** _____

EMAIL: _____

NAME OF ORGANIZATION, CONTACT PERSON, and ADDRESS OF ACTIVITY: Organized Adult Sports, Tournament, and other Activity: Marital Arts, Health Club Membership, and Qualified exercise equipment one time only. **It is the Applicants' responsibility to get an invoice.**

Name of Organization/Vendor: _____

Address of Organization/Vendor: _____ **City:** _____

ST: _____ **Zip Code:** _____ **Phone # Organization/Vendor:** _____

EMAIL: _____

FEE AMOUNT: (Indicate where appropriate).

Health Club Membership Fee: _____

Native American arts and crafts Fee: _____

Sports Tournament Fee: _____

Other Activities Fees: _____

Any amount over the \$1000 will be the responsibility of the applicant/parent

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Please note: If the entry fee is over \$1,000, the team will be responsible for the difference. When entering a team that includes non-Puyallup Tribal members, the entry fee will be divided by the total of individuals on the team. Non-Tribal members will be responsible for their share of the entry fee. The program does not pay for online training.

CHECK PROCESS: You must:

- ☛ Provide 2-week notice to process checks:
- ☛ Provide with AASS, entry flyer or tournament form that states the amount and date of the event.
- ☛ Program Coordinator will MAIL the check to the Organization/Vendors

REIMBURSEMENT OF FUNDS

If an adult relinquishes participation in any program and payment has been made to vendor, the Tribal member will either; 1) seek reimbursement from vendor or 2) reimburse the Tribe the amount of assistance issued to vendor. If applicant does not seek reimbursement or payback the Tribe for non-participation after funds has been disbursed to vender, the applicant will not receive a credit on their Adult Activities Support Service Account.

APPLICANT PRINT SIGNATURE

DATE SIGNED

APPLICATION SIGNATURE

DATE SIGNED

AUTHORIZED SIGNATURE ONLY

DATE SIGNED

TRIBAL SERVICES USE ONLY

Please Note the History of Requests by tribal Member. (Maximum \$1000)

Date of Assistance	Activity	Amount	Balance
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____