



**TROT**  
Therapeutic Riding Of Tri-Cities

### **Financial Assistance - Marty Lacy Scholarship**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Adaptive Riding Sessions 1 & 2 (circle one):    SPRING

FALL

Participant's Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Adaptive Riding classes are offered in the Spring and the Fall as two four-week sessions for each season (8 weeks in the Spring and 8 weeks in the Fall). TROT will grant 50% scholarships to riders who apply and are eligible to receive the budgeted monies. Scholarship eligibility guidelines and application deadlines will be posted on the TROT website. Recipients of rider scholarship funding may be asked to volunteer in a minimum of one fundraising event or public awareness event that benefits and promotes the TROT program. If you are unable to pay the discounted tuition, please contact our Family Coordinator at (509) 412-0112 for additional information.

Have you applied for financial assistance through: Lifespan Respite Washington [www.lifespanrespitewa.org](http://www.lifespanrespitewa.org)    YES    NO  
Ben's Fund [www.bensfund.org](http://www.bensfund.org)    YES    NO

Parent/Guardian/Caregiver Name: \_\_\_\_\_

Number of dependents: \_\_\_\_\_ Number Living in the Home: \_\_\_\_\_

Which types of aid are you currently eligible for:

Check all that apply

Food Stamps	
Free/Reduced School Lunch	
DSHS approved benefits	
Medicaid	
Other:	

Are there any pertinent circumstances that contribute to your need for financial assistance that we should be aware of?

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I certify that the information provided in this application is correct to the best of my knowledge. I understand that I must let TROT staff know if there are any changes in these circumstances during the current year.

\_\_\_\_\_  
Parent/Guardian/Caregiver/Independent Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
TROT Staff Approval Signature

\_\_\_\_\_  
Date