



... because the best in any child enriches us all!

# Application

Will's Kids strives to maintain the activities of kids whose families need assistance. Applications are reviewed by our Board of Directors and awarded as funds allow. Although we try to help when we can, Will's Kids reserves the right to refuse assistance to any applicant.

Tell us about the kids. Please print legibly.

First Name	Last name	Age	Program Requested	Cost	one-time or monthly

NAME of parent or legal guardian \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: Work (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

Number of household members \_\_\_\_\_ Monthly gross income \$ \_\_\_\_\_

*\*\*Include verification of income via paystubs or tax returns*

PROGRAM PROVIDER \_\_\_\_\_

CONTACT \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

Tell us why you need our help \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I certify that the above information is true and complete to the best of my knowledge. I agree to inform Will's Kids of any changes in my circumstances that may affect my need for the above request. I understand that failure to do so may result in termination of any awards given.*

Signed \_\_\_\_\_ Date \_\_\_\_\_



is a Texas nonprofit organization dedicated to the dreams of every child. Our mission is to help those in need discover their true potential through organized activities and educational programs. We do not discriminate on the basis of race, color, national origin, sex, religion, political orientation

or disability. Information provided within or in connection to this application is subject to verification and approval. In due diligence, our staff will contact you, your references and program directors. Your signature below authorizes release of information pertinent to your situation and our ability to make eligibility determinations. Your signature below also indicates your understanding that eligibility will be determined based on your need and our current resources. The completion of this application does not itself equal acceptance. We will notify you directly if you have been accepted into our program.

**LIABILITY:** Your submission of this application indicates your agreement that Will's Kids shall not be responsible for any loss, injury or damages incurred as a result of your participation in any program subsidized by Will's Kids. We make no warranties of any kind, either expressed or implied, as to your fitness or capability of performance. Except to the extent that we are liable under the terms of this Agreement or any agreement that otherwise governs your programs/benefits paid for by Will's Kids, you waive any claim and agree to indemnify and hold Will's Kids, our directors, officers, employees, affiliates, partners and agents harmless from all loss, liability, claims, demands, judgments and expenses arising out of or in any way connected to your performance and/or participation.

**CODE OF ETHICS:** Will's Kids promotes and adheres to a Code of Ethics that are core to the high achievers we support. These include common courtesy, respect, integrity and honor. As a Will's Kid, you will be expected to be sincere, fair and truthful in your relationships with others, maintain your beliefs and values in spite of changing circumstances and challenging environments, encourage the accomplishments of others, and maintain the highest standards of performance, conduct and cooperation with your peers, teachers, mentors, parents and family. We seek to support those who make a focused, continuous effort towards improvement of body, mind and soul.

**TERMINATION:** Failure on your part to participate in any subsidized program, failure to adhere to the rules/regulations of any service provider and/or failure to adhere to the Code of Ethics above are grounds for termination of this agreement. Will's Kids reserves the right to terminate any program, service or benefit, in whole or in part at any time without prior notice. Should you decide to discontinue the program we are subsidizing, you must notify our offices within fourteen (14) days.

I certify that the information I have provided in this application is true to the best of my knowledge. I understand that any misrepresentation by me is grounds for dismissal from Will's Kids, its programs and/or subsidies. If accepted into this program, I agree to abide by the terms stated herein.

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*Signature of Parent/Guardian*

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*Date*

*return to:*

**Will's Kids**  
3007 Woodland Hills Drive #142  
Kingwood, TX 77339

[jhayes@willskids.org](mailto:jhayes@willskids.org)

*For questions regarding this application, please contact our offices at 281-594-0548*



**PARENTAL CONSENT**

You have requested the assistance of Will's Kids for your child. Please be advised that we may use your child's photograph and/or story for publicity and/or fundraising purposes utilizing the Internet, local press and promotional materials. We recognize the need to ensure the safety and welfare of all young people. We will NOT publish your child's last name, address, phone number, email or other contact information for any reason. You may rescind this consent at any time in writing to:

Will's Kids  
3007 Woodland Hills Drive #142  
Kingwood, TX 77339

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I, \_\_\_\_\_, am the parent/legal guardian of \_\_\_\_\_ (a minor child) and have requested assistance from Will's Kids for said child. As such, I hereby grant permission to Will's Kids to interview, photograph and/or videotape my minor child and to use information or photographs/videos obtained for promotional and/or fundraising activities as may be deemed appropriate by Will's Kids without compensation.

Signature: \_\_\_\_\_

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

***Name and mailing address (please print)***

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

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

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SUBSCRIBED and SWORN TO before me on this \_\_\_\_\_ day of \_\_\_\_\_, 2011.

Notary Public \_\_\_\_\_

My commission expires \_\_\_\_\_