



May 20, 2026

Dear Santa Monica Youth Program Participant:

The new Financial Assistance package for participation in CREST's after-school programs, Community Aquatics group swim lessons, Community Classes & camps, and all school break camps is now available. A completed application for Financial Assistance is required on an annual basis. We are currently taking applications for quarterly funds available July 2026– June 2027. Incomplete applications will not be accepted. This includes the submission of copies of required documentation verifying identification, residency, and income.

Approved Financial Assistance applications are subject to a \$700 cap per child, per calendar quarter. The cap applies to the discounted portion of the fees for participation in optional programs of limited duration such as group swim lessons, community classes and after-school CREST Club and enrichment. Financial Assistance is available on a financial year basis with quarters beginning in July and ending in June (Jul-Sep, Oct-Dec, Jan-Mar, and Apr-Jun). **Funds are applied towards the cap based on the date you enroll. Discounts do not carry over from quarter to quarter.**

For example, if you enroll your child in a \$200 enrichment class in September that begins in October and you qualify for Financial Assistance at 75%, your fee will be discounted by \$150. This discount is subtracted from your \$700 quarter cap leaving a remainder of \$550 in your **July – September quarter** which could be used for other classes or mini camps. (This example is illustrated in chart form below.)

Example-Based on a quarterly cap of \$350.

Class Fee	Discount 75%	You Pay	Quarter Financial Assistance Balance
\$ 200.00	\$ 150.00	\$ 50.00	\$550.00

Please note that there are no caps or limits for participation in essential programs such as after-school childcare and full-day camps. **Financial Assistance applications must be submitted at least three weeks before programming begins. Financial Assistance must be approved before registration. Staff cannot adjust payments or apply discounts retroactively.**

If you wish to be considered for Financial Assistance, please complete the application, and return it together with any supporting documentation by mail, fax, email, or in person to one of the offices listed below. Only one application is necessary.

**Virginia Avenue Park Office**

2200 Virginia Avenue  
Santa Monica, CA 90404  
tel: 310.458.8688  
[crest@santamonica.gov](mailto:crest@santamonica.gov)

**Swim Center Office**

2225 16th Street  
Santa Monica, CA 90405  
tel. 310.458.8700  
[aquatics.mailbox@santamonica.gov](mailto:aquatics.mailbox@santamonica.gov)

**Community Classes**

[community.classes@santamonica.gov](mailto:community.classes@santamonica.gov)

The City of Santa Monica is dedicated to providing your family with the best possible youth programs. If you would like more information on other programs offered by the City, or if you have any questions about the Financial Assistance application, please feel free to call the numbers listed above.

Sincerely,

Housing and Human Services Department  
Recreation and Art Department





2026-2027
Application for Financial Assistance
for Youth Programs

Open to ALL, regardless of residency.

Financial Assistance for youth programs is offered by the City of Santa Monica's Housing and Human Services and Recreation and Arts Departments. A new application for financial assistance is required on an annual basis. New applications are accepted throughout the year. Incomplete applications will not be accepted and will be returned to the applicant.

Applications may take up to three weeks to process.

SANTA MONICA RESIDENTS: Assistance is available for youth under the age of 18 who live in the City of Santa Monica.

NON-RESIDENTS: Children who are not residents of Santa Monica, but attend a Santa Monica SMMUSD public school on permit are eligible for financial assistance for CREST Camps that take place year round.

Non-residents on permit do not qualify for financial assistance for non-school based classes such as Community Classes held at City parks, Community Aquatics, or summer camp programs.

SECTION A - GENERAL APPLICANT INFORMATION

Form for Section A containing fields for Parent/Guardian Full Name, Relationship to Children, Address (Number and Street, City, State, Zip Code), Phone (Home), Phone (Work/Other), and EMAIL.

SECTION B - CHILDREN IN THE HOUSEHOLD

This information will be used to determine eligibility for all children in your family under 18 years of age. Please list name, birthdate, school and grade in the Fall of 2025 for each child in your household, whether they need services or not. Children must be listed as dependents on income taxes for verification of guardianship.

Table with 4 columns: Child Name, Birthdate, School, Grade in Fall. It contains four rows for listing children.

ATTENTION APPLICANT:
ADDITIONAL DOCUMENTATION IS REQUIRED.
See page 2.

Office Use:
Date received: \_\_\_\_\_ By \_\_\_\_\_
Is additional documentation attached? [ ] Yes [ ] No
Incomplete applications should not be accepted.

SECTION C - ADULTS IN HOUSEHOLD

**Income tax information must be attached for all of adults in the household.** List additional adults on separate page.

Adults : \_\_\_\_\_ Relationship: \_\_\_\_\_  
\_\_\_\_\_ Relationship: \_\_\_\_\_  
\_\_\_\_\_ Relationship: \_\_\_\_\_

SECTION D - REQUIRED PAPERWORK

The Housing and Human Services and Recreation and Arts Departments administers the application and verifies application and income information.

**Verification of Identity**

\_\_\_\_\_ Copy of government issued picture IDs (ie. driver license, consulate, passport, etc.) **for all adults in the household.**

**Verification of Income**

\_\_\_\_\_ Copy of submitted 2025 Income taxes all adults in the household or IRS Form 4506-T.

**Verification of Address (Choose one)**

\_\_\_\_\_ Current Utility Bill (gas or electric) for Section 8 Housing verification

SECTION E - SIGNATURE

*By signing below, I declare that all information provided in this application is accurate and true.*

\_\_\_\_\_  
Parent/Guardian/Applicant Name (please print)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

FOR OFFICE USE ONLY

ActiveNet Date \_\_\_\_\_ Database Date \_\_\_\_\_ Letter Mailed \_\_\_\_\_

Adjusted Gross Income per 2025 Income Taxes: \_\_\_\_\_ Household # \_\_\_\_\_

\_\_\_\_\_ Verification of Residency: \_\_\_\_\_

**Financial Assistance Granted (check one):**

**Level 0** - 100% and 75% Full (Homeless/Foster Youth)

**Level 1** - 90% and 75%

**Level 3** - 50% and 25%

**IF HOMELESS, agency affiliation:**

- OPCC
- Upward Bound House
- St. Joseph's Center
- Sojourn Domestic Violence
- Other: \_\_\_\_\_

**Denied (circle reason below)**

1. Income too high
2. Child(ren) does not meet age requirements
3. Insufficient evidence of income/residency
4. Other: \_\_\_\_\_

**Non-SM Resident**

Eligible for Summer?  Yes  No

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Denied By: \_\_\_\_\_ Date: \_\_\_\_\_