

Redwood Valley Little River Band of Pomo Indians

8250 ROAD I / REDWOOD VALLEY, CALIFORNIA 95470 (707) 485-0361

FAX (707) 485-5726

Redwood Valley Rancheria Tribal Member Youth Sports and Education request

Date: _____

Name of Youth: _____

Amount requesting: \$ _____ For: _____

Check is made payable to:

Name of Organization/Person: _____

Address: _____

***Please attach all receipts and information that you have.

Note: Reimbursement will only be processed with a receipt and a completed application.

This assistance is only available to Tribal Members ages 4-17(unless they are a parent).

Checks are signed only on Thursdays. Registration fees will not be processed online.

Each Tribal Member youth is allowed \$400.00 per year-if funds are available.

You are responsible to pick-up your check. Checks will not be mailed to the Agency/Organization.

Parent/Guardian

Date

Please provide a contact number: _____

Administrative use:

Application received: _____

Available funds: _____

Approved by:

Date:

