

Kit Carson Riding Club, Inc.

P.O. Box 88075
Black Forest, CO 80908
www.KitCarsonRidingClub.com



MEMBERSHIP HARDSHIP ASSISTANCE APPLICATION PROGRAM

Confidential, Temporary Support for Active Members Facing Financial Challenges

The KCRC Membership Hardship Assistance Program provides temporary support to active club members experiencing financial difficulties. Applicants must submit a brief written explanation of their situation and show continued commitment to KCRC through participation or volunteerism. All applications will be kept strictly confidential, and awards are subject to available funding.

Requirements:

1. **Active Membership or Applicant Status.** Applicant(s) is/are current KCRC member(s) in good standing.
2. **Demonstrated Financial Hardship.** Applicant(s) must provide a brief written explanation of the circumstances creating financial hardship (e.g., job loss, medical expenses, family crisis).
3. **Commitment to Participation.** Applicant(s) should demonstrate an ongoing commitment to KCRC by volunteering, attending meetings, and participating in events when possible.

Limitations:

Hardship assistance is designed as a temporary measure and may be limited to one membership year. Applicants may reapply if circumstances persist.

Approval Process:

Assistance requests are reviewed and approved by a designated committee or by majority vote of the Board. Availability of funds may limit the number of awards granted each year. All applicants will be notified before the 10/31 renewal deadline.

Submit Completed Application Directly to the Board of Directors. Email to kcrconline@gmail.com, mail to PO Box on this form, or deliver in person to any member of the Board.

Kit Carson Riding Club, Inc.

P.O. Box 88075
Black Forest, CO 80908
www.KitCarsonRidingClub.com



MEMBERSHIP HARDSHIP ASSISTANCE APPLICATION

PLEASE PRINT LEGIBLY

Applicant Name:	Date:
Email:	\$ Amount Requested:
Reason for requesting hardship assistance:	
Briefly describe the activities you would like to participate/volunteer in:	

For KCRC Board of Director Use Only			
Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	\$ Amount Granted:	Decision Date:	Valid for Membership Year:
Reason for Denial (if applicable):			
President:	BOD MAL:		
Vice President:	BOD MAL:		
Secretary:	BOD MAL:		
Treasurer:	BOD MAL:		