Lawrence Parks and Recreation

Qualified Access Membership Application

The Lawrence Parks, Recreation and Culture Department (PRC) offers City of Lawrence residents age 18 and older the opportunity to receive a Recreation Center Membership regardless of financial conditions. A Qualified Access Membership recipient will receive a free annual Recreation Center Membership.

Who Qualifies: Any City of Lawrence resident age 18 and older that meets the qualifications.

Required Documents: Acceptable requirements include a copy of a KanCare Insurance Card, copy of a USD 497 reduced lunch letter notification, or documents that show the individual receives state or federal benefits (i.e. Housing Authority, DCF, etc.).

Important Information:

- Required documentation and qualified access membership application form may be submitted in the following ways for approval:
  - In-Person at the following locations:
    - Community Building, 115 W. 11th St., M-F, 9am-4pm, 785-832-7920
    - Sports Pavilion Lawrence, 100 Rock Chalk Way, M-F, 9am-4pm, 785-330-7355
    - Holcom Park Recreation Center, 2700 W. 27th St., By Appointment Only, 785-832-7940
    - East Lawrence Recreation Center, 1245 E. 15th St., By Appointment Only, 785-832-7950
    - Prairie Park Nature Center, 2730 Harper St., By Appointment Only, 785-832-7980
    - Lawrence Indoor Aquatic Center, 4706 Overland Dr., By Appointment Only, 785-832-7946
  - Online at www.lawrenceks.gov/lprd/forms.
  - Emailed to scholarships@lawrenceks.gov.
- All applications will be reviewed and responded to within two business days.
- If approved, membership registration can be completed online or in-person.
- Applicants must re-apply on an annual basis from the date of application.

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Qualified Access Membership Application

Date: _____

Name: _____

Address: _____

City/State/Zip: _____

Contact Phone: _____ Email: _____

DOB: _____

Required Documents: Copy of a KanCare Insurance card, USD 497 Reduced Lunch Letter, or documentation showing the child receives state or federal benefits (DCFS, Housing Authority, etc.).

I, _____ (Self), give permission to authorize PRC staff to verify the information contained on this application. I understand that deliberate misrepresentation of information subjects myself to disqualification for Qualified Access Membership consideration. I hereby certify that all of the above information is true and correct to the best of my knowledge. PRC reserves the right to request proof of any of the above information. Failure to supply the necessary information could result in denial of financial assistance. I understand that all information provided will remain confidential.

Signature: _____ Date: _____