



Wheaton Park District
Purchase of Residency Benefits
Application & Checklist

Name: _____

Address: _____

Contact Phone: _____

Email: _____

Signature: _____

Documents REQUIRED to be completed and attached to Residency Benefits Application (OFFICE USE ONLY)	Staff Initials Rick, Vicki, Carolyn, and Jamie- only
Application completed	
Address verified / not able to annex to PD	
One of the following - copy of recent tax bill, assessment notice, lease, rent receipt, or cancelled rent check	
Rec Trac Household established or updated/all members	
Household Tickler added with benefit expiration date	
Photo ID Cards/all members	
Fee calculation verified	

Received by: _____

Date: _____

Time: _____