



PARKS and RECREATION COMMISSION

Lemoore Council Chamber
429 C Street
Lemoore, CA 93245

Regular Meeting Agenda May 13, 2025 5:30 P.M.

1. Call to Order
2. Roll Call
3. Pledge of Allegiance
4. Public Comment

Public comment will be in accordance to the attached policy. If you wish to comment on an item, which is not on the agenda, you may do so under "Public Comment." The Commission cannot legally discuss or take official action on comments that are introduced at this time. Each individual's comments are limited to three minutes. When addressing the Commission, you are requested to come forward to the speaker's microphone, state your name and address, and then proceed with your presentation.

5. Administration of Oath of Office – New Commission Members (Avalos)
6. Reorganization of Commission (Avalos)
7. Introductions – Parks and Recreation Staff (Haroutian)
8. Information Only – Volunteer Hour Requirements (Haroutian)
9. Discussion and Direction – Lemoore Youth Recreation Fund (Haroutian)
10. Discussion and Direction – Upcoming Events, Programs, and Projects (Haroutian)
 - a. Easter Event
 - b. Adult Soccer
 - c. Softball Training Camp
11. Commissioner Reports and Requests
12. Next Regularly Scheduled Meeting – June 10, 2025
13. Adjournment

In compliance with the Americans with Disabilities Act and the Brown Act, if you require reasonable accommodations to attend or participate in this meeting, please make arrangements by contacting the office of the City Clerk at least 24 hours prior to the meeting. They can be reached (559) 924-6744 or by mail at 711 West Cinnamon Drive, Lemoore, CA 93245.

PUBLIC NOTIFICATION

I, Hannah Haroutian, Recreation Manager for the City of Lemoore, declare under penalty of perjury that I posted the above Parks and Recreation Commission Agenda for the regular meeting of May 13, 2025 at the Council Chamber, 429 C Street, Lemoore, CA on May 6, 2025.

//s//

Hannah Haroutian, Recreation Manager



711 W. Cinnamon Dr • Lemoore, California 93245 • (559) 924-6744 • Fax (559) 924-9003

Staff Report

Item No: 8

To: Parks and Recreation Commission

From: Hannah Haroutian, Recreation Manager

Date: May 5, 2025

Meeting Date: May 13, 2025

Subject: Commissioners Volunteer Hours Requirements

Strategic Initiative:

- | | |
|--|--|
| <input type="checkbox"/> Safe & Vibrant Community | <input type="checkbox"/> Growing & Dynamic Economy |
| <input type="checkbox"/> Fiscally Sound Government | <input checked="" type="checkbox"/> Operational Excellence |
| <input type="checkbox"/> Community & Neighborhood Livability | <input type="checkbox"/> Not Applicable |

Proposed Motion:

Information Only.

Subject/Discussion:

On March 4, 2025, Lemoore City Council adopted Ordinance 2025-01, Amending Title 2, Chapter 5 of the Lemoore Municipal Code regarding the Parks and Recreation Commission.

Article E of the ordinance outlines required volunteer hours for the Parks and Recreation Commission. A minimum of eight (8) hours per with the Recreation Department. Commission meeting attendance will count toward the monthly requirement.

Financial Consideration(s):

None.

Alternatives or Pros/Cons:

None.

Commission/Board Recommendation:

None.

Staff Recommendation:
Information Only.

Attachments:

- ☐ Resolution:
- ☒ Ordinance: 2025-01
- ☐ Map
- ☐ Contract
- ☐ Other
List:

ORDINANCE NO. 2025-01

**AN ORDINANCE OF THE CITY COUNCIL OF THE CITY OF LEMOORE
AMENDING TITLE 2, CHAPTER 5 OF THE CITY OF LEMOORE MUNICIPAL
CODE REGARDING THE PARKS AND RECREATION COMMISSION**

The City Council of the City of Lemoore does ordain as follows:

SECTION 1. Chapter 5 of Title 2 of the Municipal Code is hereby added to read as follows in its entirety:

**CHAPTER 5
PARKS AND RECREATION COMMISSION**

ARTICLE A. RULES OF THE COMMISSION

SECTION:

2-5A-1: Purpose

2-5A-2: Appointment; Tenure

2-5A-3: Removal

2-5A-1: PURPOSE:

The "Lemoore parks and recreation commission" hereinafter referred to as the commission, shall be composed of five (5) regular members. The duties of the said commission shall be to advise and recommend to the city council on the following matters:

- A. Comprehensive park planning;
- B. Acquisition of land and/or facilities;
- C. Development, design and operation of parks and recreation programming and facilities;
- D. Facility use fees and procedures;
- E. Park and facility design;
- F. Capital implement planning;
- G. Foster public awareness and public involvement in all aspects of parks and recreation;
- H. The commission shall perform such additional duties as may be prescribed from time to time by the city council, city manager or recreation manager .

The actions of the commission are subject to review by the city council.

2-5A-2: APPOINTMENT; TENURE:

The regular members of such commission shall be appointed by the mayor, with approval by the city council. Unless terminated as provided below, they shall hold their office for a term of two (2) years, except at the first appointment, two (2) members shall be appointed for a term of one

year, three (3) members shall be appointed for a term of two (2) years. All members must be residents of the city of Lemoore.

Terms shall be from January to December of each year. However, if a term expires, the sitting commissioner will continue to serve until the position is filled. Vacancies occurring other than through expiration of term, shall be filled for the unexpired term in the same manner as stated in this chapter. Members appointed to fill a vacancy with less than nine (9) months remaining in the term are automatically reappointed to a two (2) year term without additional council action.

Commission members shall serve without compensation.

2-5A-3: REMOVAL:

Any appointed member of the commission who fails to attend three (3) regular meetings in succession without notifying the chair in advance; or a member who fails to complete the required volunteer hours of eight (8) hours per month for three (3) months in succession; or a member who does not attend at least sixty percent (60%) of the regularly scheduled commission meetings within a twelve (12) month period, will be considered to have automatically resigned from the commission. Members may be removed by a majority of the city council. The decision shall be final and there shall be no appeal. (Ord. 2016-15, 12-6-2016)

ARTICLE B. MEETINGS

SECTION:

2-5B-1: Regular Meetings

2-5B-2: Notice Of Meetings

2-5B-3: Special Meetings

2-5B-4: Place Of Meeting

2-5B-5: Quorum

2-5B-6: Rules Of Order

2-5B-1: REGULAR MEETINGS:

The parks and recreation commission shall meet at least twelve (12) times per year, at the hour of five thirty o'clock (5:30) P.M. at Lemoore City Hall. (Ord. 2016-15, 12-6-2016)

2-5B-2: NOTICE OF MEETINGS:

Notice of all regular commission meetings shall be e-mailed to each member of the commission at least seventy two (72) hours prior to each meeting. Notice of all meetings shall be posted at city hall and in compliance with other Brown act requirements. (Ord. 2016-15, 12-6-2016)

2-5B-3: SPECIAL MEETINGS:

Special meetings may be called at any time by city staff. (Ord. 2016-15, 12-6-2016)

2-5B-4: PLACE OF MEETING:

The place of regular meetings shall be at Lemoore City Hall, unless otherwise stated in the call and shall comply with the Brown act for recording requirements. (Ord. 2016-15, 12-6-2016)

2-5B-5: QUORUM:

A majority (3) of the currently appointed members of the commission shall constitute a quorum. (Ord. 2016-15, 12-6-2016)

2-5B-6: RULES OF ORDER:

General parliamentary rules shall be observed in conducting meetings of the commission. (Ord. 2016-15, 12-6-2016)

ARTICLE C. OFFICERS

SECTION:

2-5C-1: Appointment Of Officers

2-5C-2: Duties Of Chair Of The Commission

2-5C-3: Duties Of The Vice Chair

2-5C-4: Duties Of The Community Services Director And City Staff

2-5C-1: APPOINTMENT OF OFFICERS:

The commission shall elect from its members a chair and a vice chair from among its membership at its first meeting of each calendar year, and each officer shall hold office for one year or until replaced by a simple majority vote of the commission. (Ord. 2016-15, 12-6-2016)

2-5C-2: DUTIES OF CHAIR OF THE COMMISSION:

The chair of the commission shall preside at the meetings of the commission, and shall perform the other duties ordinarily performed by that officer. (Ord. 2016-15, 12-6-2016)

2-5C-3: DUTIES OF THE VICE CHAIR:

The vice chair of the commission, in the absence of the chair, shall perform all duties of the chair of the commission. In the absence of both the chair and the vice chair, the commission shall elect a chair pro tem who shall perform the duties as chair during the absence and until such time as the chair or vice chair return. (Ord. 2016-15, 12-6-2016)

2-5C-4: DUTIES OF THE RECREATION MANAGER AND CITY STAFF:

The recreation manager shall not be a member of the commission. The manager and appropriate staff shall attend all regular meetings and will be responsible for preparing the agenda for regular and special meetings. The recreation manager will appoint a staff person to record the minutes for each parks and recreation commission meeting. (Ord. 2016-15, 12-6-2016)

ARTICLE D. COMMITTEES OF THE COMMISSION

SECTION:

2-5D-1: Appointment Of Special Subcommittees

2-5D-1: APPOINTMENT OF SPECIAL SUBCOMMITTEES:

Special subcommittees shall be appointed by the chair or the community services director for consideration and study of any matter not covered by the commission during regular or special meetings. The special subcommittee shall report their findings to the commission. (Ord. 2016-15, 12-6-2016)

ARTICLE E. REQUIRED VOLUNTEER HOURS

SECTION:

2-5E-1: REQUIRED VOLUNTEER HOURS

2-5E-1: REQUIRED VOLUNTEER HOURS

Each parks and recreation member shall be required to volunteer a minimum of eight (8) hours per month with the City of Lemoore Recreation Department. Attendance at regular and special meetings of the parks and recreation commission count toward the monthly volunteer hour requirement. The recreation manager shall keep track of volunteer hours completed by each commission member and report these hours monthly to the City Council.

SECTION 2. This Ordinance shall take effect 30 days after its adoption.

SECTION 3. The City Clerk is hereby directed to cause a summary of this Ordinance to be published by one insertion in a newspaper of general circulation in the community at least five (5) days prior to adoption and again (15) days after its adoption. If a summary of the ordinance is published, then the City Clerk shall cause a certified copy of the full text of the proposed ordinance to be posted in the office of the City Clerk at least five days prior to the Council meeting at which

the ordinance is adopted, and again after the meeting at which the ordinance is adopted. The summary shall be approved by the City Attorney.

The foregoing ordinance was introduced at a regular meeting of the City Council of the City of Lemoore held on the 18th day of February 2025 and passed and adopted at a regular meeting of the City Council held on the 4th day of March 2025 by the following vote:

AYES: Gornick, Lyons, Brewster, Cruz, Matthews

NOES: None

ABSENT: None

ABSTAIN: None

ATTEST:



Marisa Avalos
City Clerk

APPROVED:



Patricia Matthews
Mayor



711 W. Cinnamon Dr • Lemoore, California 93245 • (559) 924-6744 • Fax (559) 924-9003

Staff Report

Item No: 9

To: Parks and Recreation Commission

From: Hannah Haroutian, Recreation Manager

Date: May 5, 2025

Meeting Date: May 13, 2025

Subject: Lemoore Youth Recreation Fund

Strategic Initiative:

- | | |
|---|--|
| <input type="checkbox"/> Safe & Vibrant Community | <input type="checkbox"/> Growing & Dynamic Economy |
| <input checked="" type="checkbox"/> Fiscally Sound Government | <input type="checkbox"/> Operational Excellence |
| <input type="checkbox"/> Community & Neighborhood Livability | <input type="checkbox"/> Not Applicable |

Proposed Motion:

Discussion and Direction on Youth Recreation Fund.

Subject/Discussion:

The Lemoore Youth Recreation Fund has been a longstanding resource for the community, offering financial assistance to individuals and families who cannot afford the full cost of recreational program registration fees.

The program is sustained through the generous support of individuals, service clubs, local businesses, and other community members.

In the past, eligibility was often based on participation in the school lunch program; however, with the discontinuation of that system, consistent eligibility guidelines and standardized percentages of fee coverage have become unclear.

Current and previously used Lemoore Youth Recreation Fund applications are attached for review.

Financial Consideration(s):

The fund currently has a balance of \$14,000.

Alternatives or Pros/Cons:

None.

Commission/Board Recommendation:

None.

Staff Recommendation:

Discussion and Direction.

Attachments:

☐ Resolution:

☐ Ordinance:

☐ Map

☐ Contract

☒ Other

List: Youth Recreation Fund Application



Let Us Help!

Thank you for your interest in a Lemoore Youth Recreation Fund. We offer financial assistance to individuals and families who are not able to pay full fees for programs.

Every day, we work side-by-side with our neighbors to make sure that everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive.

Rec Youth Fund are made possible through generous donations from individuals, service clubs, and community members and businesses.

Please Note:

Applications must be submitted with all required documentation. Incomplete applications cannot be processed. All financial assistance is distributed on a case-by-case, first-come, first-served basis.

Please return this application to Parks and Recreation: 721 W. Cinnamon Dr. Lemoore CA 93245

You will receive a phone call/email within 2 weeks regarding your qualification and next steps.

Want to give?

Youth Recreation Fund relies heavily on donations and fundraisers to replenish funds, if you are interested in donating please contact us, 559.924.6744 Opt. 2 or email, parksandrecreation@lemoore.com. Funds may not be available at times, in this situation your application will be placed on a waiting list till funds are available. The Parks and Recreation Manager has the final approval on all applications, unfortunately not all applications are guaranteed to receive funding.

APPLICATION CHECKLIST

Please initial each checkbox to verify completion of your application.

Please mark out all social security numbers, tax ID numbers and/ or credit card numbers before submitting any paperwork.

____ Required: Completed Scholarship Application form

INITIALS

Including; Explanation of Benefits, Income & Expense Worksheet and signed Acknowledgment

____ Required: Most recent tax return from each adult in the household, or Verification of Non-Filing from IRS if you did not file

INITIALS

- If you do not/did not file federal income taxes, please call 1-800-TAX-FORM (1-800-829-1040) for a verification of non-filing or go to IRS.gov for other information
- Only the 1st page of your IRS-1040 Form is needed
- If all adults in the household did not file jointly, a separate tax form is required for each adult.
- Note: if you receive Supplemental Security Income (SSI), then verification from IRS is not required

____ Required (*if employed*): Paycheck Stubs from the last 2 pay periods for each adult in the household OR letter from your employer verifying your employment and stating your salary/wage rate

INITIALS

____ *If Applicable*: Documentation of any other income such as SSI, SSDI, unemployment, pension, child support, student loans/aid, food stamps, alimony, etc.

INITIALS

____ *If Applicable*: Layoff Notice from employer, note from case manager, transition house or student schedule etc.

INITIALS

OFFICE USE ONLY

RECEIVING STAFF: _____ DATE RECEIVED: ____/____/____

APPROVED:

☐ YES _____% amount off \$ _____ PROGRAM APPROVED FOR: _____

DATES OF APPROVAL: _____

☐ NO **DECLINED REASON:** _____

APPROVED BY: _____

DATE: ____/____/____

WHAT ARE YOU APPLYING FOR?
(CHECK ALL THAT APPLY)
☐ ADULT
☐ YOUTH/STUDENT ☐ PROGRAMS

PRIMARY APPLICANT	
NAME:	BIRTH DATE:
ADDRESS:	CITY/STATE/ZIP
PHONE NUMBER	EMAIL:
EMPLOYER:	

SECONDARY APPLICANT (IF APPLICABLE)	
NAME:	BIRTH DATE:
ADDRESS:	CITY/STATE/ZIP
PHONE NUMBER	EMAIL:
EMPLOYER:	

HOUSEHOLD MEMBERS					
FIRST NAME	LAST NAME	DOB	DEPENDENT (Y/N)	RELATIONSHIP	Y MEMBERSHIP (Y/N)

PLEASE SHARE WHY YOU ARE REQUESTING FINANCIAL ASSISTANCE (REQUIRED)

PRIMARY ADULT INCOME
(MONTHLY)

SECONDARY ADULT INCOME
(MONTHLY

SALARY/WAGES
UNEMPLOYMENT
SOCIAL SECURITY
CHILD SUPPORT
FOOD STAMPS
SPOUSAL SUPPORT
SCHOOL LOAN/AID
HOUSING ALLOWANCE
OTHER

[illegible]

MONTHLY EXPENSE

HOUSING	\$
GROCERIES	\$
MEDICAL	\$
UTILITIES	\$
TRANSPORTATION	\$
CHILD CARE	\$
OTHER	\$
TOTAL EXPENSES	\$

ACKNOWLEDGMENT

SIGNATURE OF PRIMARY APPLICANT

DATE _____

SIGNATURE OF SECONDARY APPLICANT

DATE



Let Us Help!

Thank you for your interest in a Lemoore Youth Recreation Fund. We offer financial assistance to individuals and families who are not able to pay full fees for programs.

Every day, we work side-by-side with our neighbors to make sure that everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive.

Rec Youth Fund are made possible through generous donations from individuals, service clubs, and community members and businesses.

Please Note:

Applications must be submitted with all required documentation. Incomplete applications cannot be processed. All financial assistance is distributed on a case-by-case, first-come, first-served basis.

Please return this application to Parks and Recreation: 721 W. Cinnamon Dr. Lemoore CA 93245

You will receive a phone call/email within 2 weeks regarding your qualification and next steps.

Want to give?

Youth Recreation Fund relies heavily on donations and fundraisers to replenish funds, if you are interested in donating please contact us, 559.924.6744 Opt. 2 or email, parksandrecreation@lemoore.com. Funds may not be available at times, in this situation your application will be placed on a waiting list till funds are available. The Parks and Recreation Manager has the final approval on all applications, unfortunately not all applications are guaranteed to receive funding.

APPLICATION CHECKLIST

Please initial each checkbox to verify completion of your application.

Please mark out all social security numbers, tax ID numbers and/ or credit card numbers before submitting any paperwork.

INITIALS

Required: Completed Scholarship Application form

Including; Explanation of Benefits, Income & Expense Worksheet and signed Acknowledgment

INITIALS

Required: Most recent tax return from each adult in the household, or Verification of Non-Filing from IRS if you did not file

- If you **do not/did not** file federal income taxes, please call 1-800-TAX-FORM (1-800-829-1040) for a verification of non-filing or go to IRS.gov for other information
- Only the 1st page of your IRS-1040 Form is **needed**
- If all adults in the household **did not** file jointly, a separate tax form is required for each adult.
- **Note:** if you receive Supplemental Security Income (SSI), then verification from IRS is not required

INITIALS

Required (if employed): Paycheck Stubs from the last 2 pay periods for each adult in the household OR letter from your employer verifying your employment and stating your salary/wage rate

INITIALS

If Applicable: Documentation of any other income such as SSI, SSDI, unemployment, pension, child support, student loans/aid, food stamps, alimony, etc.

INITIALS

If Applicable: Layoff Notice from employer, note from case manager, transition house or student schedule etc.

OFFICE USE ONLY

RECEIVING STAFF: _____ DATE RECEIVED: ____/____/____

APPROVED:

☐ YES _____% amount off \$ _____ PROGRAM APPROVED FOR: _____

DATES OF APPROVAL: _____

☐ NO **DECLINED REASON:** _____

APPROVED BY: _____

DATE: ____/____/____

WHAT ARE YOU APPLYING FOR?
(CHECK ALL THAT APPLY)
☐ ADULT
☐ YOUTH/STUDENT ☐ PROGRAMS

PRIMARY APPLICANT	
NAME:	BIRTH DATE:
ADDRESS:	CITY/STATE/ZIP
PHONE NUMBER	EMAIL:
EMPLOYER:	

SECONDARY APPLICANT (IF APPLICABLE)	
NAME:	BIRTH DATE:
ADDRESS:	CITY/STATE/ZIP
PHONE NUMBER	EMAIL:
EMPLOYER:	

HOUSEHOLD MEMBERS					
FIRST NAME	LAST NAME	DOB	DEPENDENT (Y/N)	RELATIONSHIP	Y MEMBERSHIP (Y/N)

PLEASE SHARE WHY YOU ARE REQUESTING FINANCIAL ASSISTANCE (REQUIRED)

EXPLAIN WHY/HOW, BESIDES FINANCIALLY, YOU WOULD BENEFIT FROM PARTICIPATING**INCOME & EXPENSES**

INCOME	PRIMARY ADULT INCOME (MONTHLY)	SECONDARY ADULT INCOME (MONTHLY)
SALARY/WAGES	\$	\$
UNEMPLOYMENT	\$	\$
SOCIAL SECURITY	\$	\$
CHILD SUPPORT	\$	\$
FOOD STAMPS	\$	\$
SPOUSAL SUPPORT	\$	\$
SCHOOL LOAN/AID	\$	\$
HOUSING ALLOWANCE	\$	\$
OTHER	\$	\$
TOTAL INCOME	\$	\$

EXPENSES	MONTHLY EXPENSE
HOUSING	\$
GROCERIES	\$
MEDICAL	\$
UTILITIES	\$
TRANSPORTATION	\$
CHILD CARE	\$
OTHER	\$
TOTAL EXPENSES	\$

Application is for individuals/couples living at the same address and sharing the same financial information. Assistance will only be given for those whose names appear on the supporting financial documents.

ACKNOWLEDGMENT

I acknowledge that all of the above information is true to the best of my knowledge. I UNDERSTAND THAT THE COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE THAT I WILL RECEIVE A FINANCIAL ASSISTANCE. I understand that my approved Youth Recreation Fund monies will be effective for six months from my approval date at which time I must reapply if I require further assistance. I certify that the above information is accurate and complete and I authorize the City of Lemoore to verify the above information. I am aware that this application doesn't mean that I am automatically signed up for the chosen program, payment must be made in order to be registered.

SIGNATURE OF PRIMARY APPLICANT

DATE

SIGNATURE OF SECONDARY APPLICANT

DATE

**Lemoore Lion's Club youth Recreation Fund
C0-sponsored by
The Lemoore Parks and Recreation Department**

Financial Information:

All applicants must provide the previous year's tax return. If the applicant's income situation has changed since the filing of the tax return, 3 months of income verification that supports the change may be submitted.

Eligibility Guidelines:

The Lemoore Youth Recreation Fund uses the Lemoore Union Elementary School District's breakfast and lunch guidelines to determine eligibility for the Recreation Fund. (See Attached) **If your income qualifies for the free lunch program, the Recreation Fund will pay 75% of any program for your child. The remaining 25% will be paid by the applicant.** A maximum of \$100 per year may be paid to the qualifying family with approval of the Parks and Recreation Director.

If your income qualifies for the reduced lunch program, the Recreation Fund will pay 40% of any program for your child. The remaining 60% will be paid by the applicant. A maximum of \$100 per year may be paid to the qualifying family with approval of the Parks and Recreation Director.

Fund Availability:

The Youth Recreation Fund relies on donations and fund raisers to replenish funds. At certain times, there may not be funds available. In this situation, applicants will be put on a waiting list until funds are once again available. The Parks and Recreation Director has final approval on all applications. Applicants are not guaranteed to receive funding.

Date: _____

Name (Parent) _____

Child Participant's name _____

Address: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Total Household Size: _____ Monthly Household Income: _____

I would like to apply for Recreation Fund Money for the following programs:

Program: _____	Fee: _____
Program: _____	Fee: _____

I acknowledge that all of the above information is true to the best of my knowledge. I understand that my approved Youth Recreation Fund monies will be effective July 1 _____ through June 30 _____ at which time I must reapply if I require further assistance.

Signed: _____ Date: _____

Approved By: _____ Date: _____ Receipt # _____