



Fee Waiver Program

We want every parent who could benefit from using the OurFamilyWizard® toolset to be able to do so. But we understand that some may not have the financial means to purchase an annual subscription, which is why we have offered fee waivers since our inception. Parents who are eligible may qualify for discounted or free subscriptions through our fee waiver program.

Application Instructions

Please follow the instructions listed below when applying for an OurFamilyWizard® fee waiver. If you have any questions that are not answered by these instructions, please contact our customer support team at (866) 755-9991 or info@ourfamilywizard.com.

- **Step 1:** Applicants must be able to complete all required contact information fields in the application in order for their submission to be processed. Please provide a phone number and/or email address for the co-parent. This information is required in order for OFW® to be able to connect parent accounts correctly.
- **Step 2:** Every application **must be submitted with supporting documentation that verifies the applicant's eligibility**. The documentation options listed in Step 2 of the application are the only accepted documents for the fee waiver program. If ineligible documentation is provided, OFW® customer support will reach out at the provided email address for additional documentation.
- **Step 3:** This step should only be completed on applications for applicants who are working with legal aid or are receiving other legal services *pro bono*. Step 3 must be completed by the legal practitioner and **cannot be completed by the applicant**. Legal practitioners completing this step must still provide a signed letter on their letterhead verifying that they are providing legal services *pro bono* or at a reduced rate.



Print clearly or fill electronically and email the completed forms and documentation to: info@ourfamilywizard.com

* denotes a required field

Step 1: Contact information for applicant and their co-parent

Applicant

*First and Last Name: [text box]

*Address: [text box]

*City: [text box] *State: [text box] *ZIP code: [text box]

*Telephone: [text box] *Email: [text box]

Other Parent

*First and Last Name: [text box]

Address: [text box]

City: [text box] State: [text box] ZIP code: [text box]

*Telephone: [text box] *Email: [text box]

Step 2: One of the following documents MUST be included with the application

- Radio button options for document types: In forma pauperis, benefits verification, signed letter on letterhead.

..... Below to be completed by legal professionals only.

Step 3: Legal professionals to complete this section only if submitting on behalf of parent(s):

*First and Last Name: [text box]

*Organization: [text box] *Title: [text box]

*Address: [text box]

*City: [text box] *State: [text box] *ZIP code: [text box]

*Telephone: [text box] *Email: [text box]

For professionals, please choose one of the following and sign below:

- Radio button options for professional status: court officer with financial need, legal professional providing free services, or reduced rate services.

Signature: _____ Date: _____

Once completed application and documentation are submitted, please allow up to 5 business days for a response. Existing subscribers will receive an email notification and new subscribers will receive a welcome email upon approval.