



## Fair Fight Bond Fund Support Request Form

The Fair Fight Bond Fund is a community fund in the State of Washington that supports with paying bonds for persons detained by immigration authorities. This fund is an initiative of the Washington Immigrant Solidarity Network (Waisn).

Waisn's mission is to protect and advance the power of immigrant and refugee communities through a multiracial, multiethnic, multilingual, multigender, multigenerational, and multi-faith coalition.

All of the money in the Fund comes from community-driven fundraising initiatives and donations.

We are not a bond company or bail bondsman. In the case that we pay a bond, released individuals will *NOT* be required to repay the bond nor do we require payment of any percentage of the bond amount in order to be eligible for assistance.

We **CAN** support with paying a bond for persons currently detained by immigration authorities.

We **CANNOT** provide legal advice or legal support.

We **CANNOT** support with paying bail in criminal pre-trial detention.

We **CANNOT** support with making payments related to bonds paid by private bond companies.

To request support from our fund, please complete the following application form. Information provided to us will be kept confidential. Completing this form is *NOT* a guarantee that we will pay this bond.

Please complete as many fields as are applicable and relevant to the case, following the instructions provided for each question. Fields marked with a red asterisk (\*) are required and the form cannot be without such information. Please write "N/A" for questions you do not have the answer to.

We will follow-up as soon as possible. In general, we try to respond within two weeks. Please allow one week from the date of submission before contacting us about this request.

Decisions about which requests we can support with are informed by the Fair Fight Bond Fund Advisory Committee—a group of impacted community members and allies.

Anyone detained by United States immigration authorities in any part of the country who has had a bond set that they do not have resources to pay is eligible to receive support from the Fair Fight Bond Fund. We will consider all applications received but will give priority to people detained in Washington State and the Pacific Northwest or who have connections to Washington State and the Pacific Northwest.

We believe that nobody should be detained and that detention is unjust and dangerous. However, due to limited resources, we cannot cover every request that we receive. We will give priority to people who face exacerbated vulnerabilities in detention due to any of the following situations:

- People with serious physical or mental health disabilities, chronic illnesses, pregnancy, or in need of urgent medical attention;
- Primary caretakers of dependents—particularly minors, elders, and/or people with serious disabilities or chronic illnesses—who are facing immediate hardship due to the applicant’s detention;
- People who identify as queer or transgender;
- People who face exacerbated vulnerabilities in detention based on their gender, sexuality, language, faith, or other identity factors;
- People who have been detained for more than 3 months by any federal, state, or local law enforcement agency.

In general, applications will be reviewed in the order they are received. However, a request will be reviewed sooner if there is a deadline or situation of urgency.

We will consider the following situations when determining urgency:

- a final immigration court hearing;
- urgent illness or health concerns;
- family emergencies;
- exacerbated hardship in detention;
- immigration case deadlines; or
- deadlines or urgency in other situations, such as criminal or civil court, housing, or employment.

We do not have a limit of how much we will pay for any individual bond, but we can only pay up to \$50,000 total in bonds each month.

Paying a portion of the bond is not a requirement to receive support from the Fund. However, because there is such a high need to support with immigration bonds, we ask that you please consider contributing as much as you can with the bond amount so that we can have the opportunity support with bond in more cases.

If someone can contribute with the bond amount, please provide that information and we will get in contact to discuss the process. If and when the amount of the bond is returned to us by the immigration authorities upon the resolution of the immigration case, anyone who contributed would be eligible to receive a refund of their contribution.

Money paid by the Fair Fight Bond Fund to secure the release of a detained community member will be returned to the Fund once there is a resolution in the immigration case and will be used for others in need of bond support.

If you have any questions or want to share updates about a request you've submitted, please email us at [bond@waisn.org](mailto:bond@waisn.org) or call the **WAISN Hotline** at **1-844-724-3737**.

**Date of Request: \***

*Today's date.*

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**Who is completing this request form? \***

*Please share your name, pronouns, contact information, preferred language, relationship to the person who is detained, and, if you are an attorney or part of an organization, please also give the name of the organization and your role. If you do not speak English or Spanish and need for us to arrange an interpreter in order to contact you, please state so.*

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**Is there someone else we will be in contact with regarding this request?**

*This includes any additional person(s) we may need to contact, including to answer questions related to this request, contributions to the bond payment, and/or coordinating support after the person is released if we pay the bond. If there is someone else we will need to communicate with, please share the name, pronouns, relationship to the detained community member, phone number, email, name of organization (if applicable), and preferred language. If the contact person does not speak English or Spanish and we need to arrange for an interpreter to communicate with them, please state so. If there is not a separate contact person, we will contact the person completing the form for all follow up.*

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**Full Name of Person Detained: \***

*Please use this format: **SURNAME 1 SURNAME 2, First Name Middle Name**. Please provide the name as it appears in the immigration system. If there is an alternate name the person prefers to be referred by, please note that as well.*

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**If known, please provide the pronouns the community member uses to be referred to. This can be in whichever language they prefer.**

*Example: they/them, elle, she/her, he/him, ella, el.*

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**"A" Number: \***

*"Alien Registration Number." An 8 or 9 digit number that can be found on most immigration documents.*

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**Country of Birth: \***

*Please provide the country of birth of the person who is detained. If the person has citizenship or nationality in a different country, please note that as well.*

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**Date of Birth: \***

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**Preferred Language: \***

*Please provide the community member's preferred language. Please also share any notes regarding the fluency or literacy in the language. This will help us determine if we need to provide interpretation/translation to communicate with the person.*

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**Additional Language(s):**

*If the detained community member uses any additional languages, please note them here along with any notes regarding the fluency or literacy in these languages. This will help us determine if we need to provide interpretation or translation support.*

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**Where is this community member detained? \***

*Please provide the name of the detention facility where they are detained. If the name of the facility is not known, provide the city and state where they are detained.*

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**Bond Amount: \***

*The total amount of this bond.*

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**Who set this bond? \***

- An Immigration Judge
- An Immigration Customs Enforcement (ICE) Officer
- Not known

**Date that the Bond was Granted:**

*MM/DD/YYYY*

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**Is there any opportunity or efforts being made for the bond amount to be reduced or for the community member to be released another way besides bond? \***

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**Is anyone (the detained community member, loved ones, other organizations, etc.) able to pay any portion of this bond? If so, how much? \***

*It is not required for someone else to pay a portion of this bond in order to receive support from the Fair Fight Bond Fund. However, if someone else is able to pay a portion, it can help us use our resources to free more community members. If there is someone who can contribute to this bond, please list their contact information, relationship to the detained individual, and the amount they can contribute.*

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**Please share as much as you can about the financial situation, support, and resources that the person who is detained has available. The more information that is shared, the better. \***

*This may include financial support from family or community members outside of detention, savings, assets, the person's individual income, or other information that is relevant.*

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**Date of Next Immigration Court Hearing: \***

*MM/DD/YYYY*

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**Please share what type of hearing is the next scheduled immigration hearing and any other relevant details regarding the upcoming hearing. \***

*Additional details can include: location of hearing, immigration judge, any filing deadlines related to the hearing, number of hearings attended so far, etc.*

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**Immigration Case Details: \***

*This can include current or past immigration status held, immigration relief that the community member is eligible for or seeking, any prior removal orders, status of any pending applications or appeals, etc.*

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**How did this person end up in immigration detention?**

*Were they detained at the border? Transferred into immigration detention after serving time in the US criminal legal system? Detained by ICE as part of an raid or individual detention? Please include where the detention happened and any relevant details you may have. This information helps us to track how immigration officials are operating in our communities.*

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**How long has the person been in detention? \***

*And have they been transferred to different facilities?*

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**Address and Phone Number of Community Member After Release: \***

*Immigration officials require that we provide this information when paying bond. It can be updated later.*

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**How will the community member get to their destination after they are released from detention? \***

*Will an individual pick up the community member from detention? Is there a group or organization that will arrange this? What travel or lodging arrangements will need to be made and who will be making these arrangements? Please provide the name, relationship, and contact information of who we should communicate with regarding these questions. If you need support in making these arrangements, please note that here and we will follow up.*

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**How does the person who is detained identify in terms of their gender identity?**

*This information will **not** be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**How does the person who is detained identify in terms of their race and/or ethnicity?**

*This information will not be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**How does the person who is detained identify in terms of their religion or faith?**

*This information will not be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**Does the person who is detained identify as queer, trans, or LGBTQIA+ (Lesbian, Gay, Bisexual, Trans, Queer, Intersex, Asexual, Two Spirit, or other similar category of gender or sexual diversity)?**

*This information will not be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**Does the person who is detained have any serious physical or mental disabilities, chronic illness, health concerns, currently pregnant, or in need of care or medical attention?**

*This information will not be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**Is the person who is detained the primary caretaker for a minor, elder, or a person with serious illness or disabilities?**

*This information will **not** be used to prejudice applicants. We will use your response to this question to assess if this request falls within any of the categories for priority that we have noted above. This question is being asked to identify applicants who may be disproportionately negatively impacted by the detention and deportation system and/or may be in more need of financial support. Answers to this question also help us deepen our understanding of who we are serving, and which communities are impacted by immigration detention. This question is not required. Please answer how you are most comfortable answering and identifying.*

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**Please share any additional information of any hardships the detained community member or any dependents for which they are the primary caretaker are currently facing and/or ways in which being detained is impacting the community member and their loved ones.**

*If there is any reason for urgency due to exacerbated hardship in detention due to reasons not already discussed above, please state them here.*

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**Is there a deadline by which this bond must be paid? If so, please state the deadline date and details regarding this deadline. \***

*This could include a final immigration court hearing approaching, deadlines related to an application for immigration relief, or deadlines or urgency for other situations, including criminal or civil court, housing, employment, or a family emergency.*

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**Does the person needing bond support consent to WAISN / Fair Fight Bond Fund using non-identifying information provided in this request for fundraising purposes? \***

*All of the money in the Fair Fight Bond Fund comes from community-driven fundraising initiatives and donations. Stories directly from people in detention help us raise money in order to pay bond. We will NEVER share information without the consent of the person requesting support and we will NEVER share any identifying information. All money raised through our fundraising efforts go directly to the bonding people out of detention.*

- Yes, any non-identifying information provided with this application.
  - No
  - Only what is shared below:
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**How did you hear about the Fair Fight Bond Fund?**

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|----------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Fair Fight Bond Fund Website                | <input type="checkbox"/> News (Radio, TV, Newspaper, etc.) |
| <input type="checkbox"/> Social Media (Facebook, Twitter, Instagram) | <input type="checkbox"/> Community Organization            |
| <input type="checkbox"/> WAISN Hotline                               | <input type="checkbox"/> Another Bond Fund                 |
| <input type="checkbox"/> Attorney or Legal Representative            | <input type="checkbox"/> Other: _____                      |
| <input type="checkbox"/> Family, Friend, Other Community Member      |                                                            |

Please email this completed form to [bond@waisn.org](mailto:bond@waisn.org). If you have a copy of the bond order, please include a copy with this request form.

You can also mail this application to:  
ATTN: WAISN Fair Fight Bond Fund  
PO Box 48159  
Seattle, WA 98148

If you would like a copy of this application, please save a copy for your records before sending it to us.

We will follow-up as soon as possible. In general, we try to respond within two weeks. Please allow one week from the date of submission before contacting us about this request unless there is a more urgent deadline.

If you have any questions or want to share updates about a request you've submitted, please email us at [bond@waisn.org](mailto:bond@waisn.org) or call the WAISN Hotline at 1-844-724-3737.