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## RECREATIONAL FUNDING APPLICATION

**ALL INFORMATION PROVIDED ON THIS APPLICATION IS KEPT STRICTLY CONFIDENTIAL**

### FUNDING

- available for dependent children, living at home who are under the age of 18.
- may be used for registration fees for swimming, music art lessons, etc.
- applicants are asked to contribute 10% of the total cost with a minimum contribution of \$10.00 AND to provide copies of the registration fees.
- depending on available funds, the maximum available per child per year for qualifying families is \$300.00

### ELIGIBILITY

Applicants **MUST** be residents of the Town of the Blue Mountains AND have a combined gross family income less than \$40,000 per year.

### APPLICANT [Parent or Legal Guardian]

\_\_\_\_\_  
Surname

\_\_\_\_\_  
First Name & Initial

### ADDRESS

\_\_\_\_\_  
Street/PO Box #

\_\_\_\_\_  
Town

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
TELEPHONE

\_\_\_\_\_  
Daytime

\_\_\_\_\_  
Evening

\_\_\_\_\_  
Email

\_\_\_\_\_  
# OF CHILDREN IN FAMILY

\_\_\_\_\_  
# OF CHILDREN APPLYING

**SOURCE OF INCOME** – Please indicate source by **CIRCLING** one of the following:

Employment – Ontario Works – ODSP – OSAP – Spousal Support – Other [Please specify] \_\_\_\_\_

**GROSS ANNUAL FAMILY INCOME** *from all sources* = \$ \_\_\_\_\_

DECLARATION – I am the applicant named above. I certify that all the statements in this application are true to the best of my knowledge. No information required has been omitted or unreported.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
FOR OFFICE USE – Signature of reviewer

\_\_\_\_\_  
Date

**Please complete one section for each child and for each activity.**

NAME OF CHILD		M/F	AGE	BIRTHDATE
<b>Name/Address of activity provider</b> [example – B.V.A.A. – hockey, soccer, skating, swimming lessons, art lessons, camp...]				
<b>REGISTRATION FEE</b> Please provide registration form!		<b>FAMILY CONTRIBUTION</b> [10% of total with \$10.00 min]		<b>AMOUNT OF FUNDING REQUESTED</b>
\$		\$		\$
<b>Registration form attached? YES /NO</b>				<b>If NO, please explain:</b>

NAME OF CHILD		M/F	AGE	BIRTHDATE
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