



# FINANCIAL ASSISTANCE

Application Form 2022/23

DATE RECEIVED

CLERKS NAME

(Please submit one application per person/family)

## Parent(s)/Guardian(s)/Designate(s):

Last Name	First Name	Phone	Birth Date
Last Name	First Name	Phone	Birth Date
Address (Apt. #, Street)			Postal Code

## Children's Name(s) and Birthdate(s):

Children's Name(s)		Birth Date M/D/Y	Gender M/F	Children's Name(s)		Birth Date M/D/Y	Gender M/F
Last Name	First Name			Last Name	First Name		

How did you hear about the Financial Assistance Program? \_\_\_\_\_

**You are eligible to receive a Powell River Recreation Access Membership of 52 visits per family member to swimming, skating, gym or fitness classes, when your combined gross family**

## Federal Income Scales - Low-Income Cut-Offs 2020

# in Household	1	2	3	4	5	6	7 or more
Income under	26,426	32,898	40,444	49,106	55,694	62,814	69,934
Check qualifying box	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Financial Assistance program runs from date of registered membership for 1 year - therefore assistance must be used during this time period.

The following documentation is required once per year:

## PROVIDE COPIES OF:

- ☐ Proof of Residency (BC Driver's License, BC Hydro Bill)
- ☐ Income Tax Notice of Assessment or
- ☐ BC Benefits Income Assistance

## Please note:

Any personal information that is collected on this form will be managed in accordance with the Freedom of Information and Protection of Privacy Act. Direct enquiries, questions, or concerns regarding the collection, use, disclosure, or safeguarding of personal information associated with this form to: Freedom of Information and Protection of Privacy Coordinator, Legislative Services 20338 - 65 Avenue, Langley BC, V2Y 3J1 or phone 604 533-6004.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Parent/Guardian/Designate

Administrative Use:

APPROVED

DENIED