RENEWAL FORM

The goal of the Community Access Program is to ensure all members of our community are able to access the wellness and recreation opportunities available at the Canada Games Aquatic Centre.

Please Note: Renewals are processed on a first-come, first-served basis. If funding is not available at the time a renewal is approved, you will be placed on a waitlist. You may only submit a renewal form if you filled out a membership application form in the last 12 months and by filling out a renewal form, you confirm that your financial status has not changed since your last membership application.

Full Name:			
Address:			
City:	Province:		Postal Code:
Home Phone:		Other Phone:	
Email:			
Are you applying to renew the sa	me membership you had? Ch	neck one: 🗆 YES	□NO
If you are applying for a different	type of membership, check w	hich type of mem	bership you are applying for:
☐ INDIVIDUAL ☐ FAMILY			
Please Note: If you are looking to may change the approval amount		may affect your su	ibsidy level as changing the type of the membership
If you are applying for a 'Family' r	membership, please list the fu	III names and date	s of birth of the family members:
1	DOB:	3	DOB:
2	DOB:	4	DOB:
Were there any factors or circum Check one: ☐ YES ☐ NO	stances that affected your ab	ility to use your pr	evious membership?
If yes, please explain below:			
With my signature, I guarantee the Should any of the information characteristics.	•	• •	true and accurate as of the date of my application. Games Aquatic Centre.
Signature			Date
· · · · · · · · · · · · · · · · · · ·	indicate the number of visits rec	orded on the last 3-r	month membership: