

## **APPLICATION 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:** Assistance from CAP is to provide a basic, 3-month membership. Applications are processed on a first-come, first-served basis. Approved applicants will be set up with a membership when funding is available. If funding is not available at the time an application is approved, it will be placed on a waitlist. Patrons can apply for a renewal three times and financial application forms only need to be completed every 12 months (there is a special application form for renewals). As this is a new program, available funding is limited. Those currently paying for a membership are not eligible to receive funding from this program.

Full Name:			Date of Birth (MM/DD/YY):		
Address:					
City:		Province:		Postal Code:	
Home Phone:		Other Phon	ıe:		
Email:			_		
For which type of memb	ership are you applying?(	Check one: 🗆 INDI	IVIDUAL	FAMILY	
If you are applying for a 'F	amily' membership, please	list the full names an	nd dates of birth	n of the family members:	
1	DOB:	3		DOB:	
2	DOB:	4		DOB:	
Have you applied to the	Community Access Progra	m before? Check on	ne: 🗆 YES	□NO	
<u>If yes</u> , when did you last	apply? (MM/DD/YY):		_		
• • • • • • • • • • • • • • • • • • • •	old. The level of members	•		total income (before taxes) of olications ranges from 50% to	
How many adult	s are in your household? _	How ma	any children are	e in your household?	
What is the total	gross annual income for a	all members of your	household? \$		

To verify financial need, the following documentation must be submitted with this application for your household. Documents submitted must be for the most recent calendar year/pay period. Plate indicate the documentation being submitted with this application (photocopies are accepted)	lease check the box(es)
☐ Canada Revenue Agency Notice of Assessment(s)	
<u>OR</u>	
If you do not have a CRA Notice of Assessment, please provide documentation of income from a you and any other adult members of your household. Examples include:	II sources that apply to
☐ Canada Child Benefit statement	
☐ Pay stubs for the past four (4) consecutive pay periods (indicating full-time hours of work)	
☐ Employment Insurance (EI) statement	
☐ Old Age Security (OAS) and Canada Pension Plan (CPP) statements	
☐ Other government-issued documentation verifying current income. Please specify:	
If you do not wish to submit proof of income directly with this application, you may show proof of Canada Games Aquatic Centre Corporate Services staff. If that is the case, please check here $\Box$ Staff will contact you when processing the application to arrange a time during regular office how	·
Once your application is processed, you will be notified as to whether it has been approved and steps. You will also be notified of the amount to be paid, if applicable.	advised of any next
Membership Terms: You will be approved for a basic, 3-month membership only to ensure a reginancial situation is completed. If your situation has not changed, you may reapply to the prograyour membership in preparation for membership renewal. Should funding be limited at the time placed on a waiting list; this is to allow equal opportunity for all those in need of assistance.	am prior to the expiry of
Patrons can apply for a renewal three times and financial application forms only need to be com	pleted every 12 months.
As this is a new program, available funding is limited. Those currently paying for a membership a funding from this program.	are not eligible to receive
During the course of your membership, you must notify the Canada Games Aquatic Centre of an financial situation or changes that may inhibit the ability to use the membership. This assists wit allow other applicants who may be on the waitlist to benefit from the program. Community Accememberships are not subject to cancellation fees.	th freeing up funds to
Proof of identification will be required to set up any memberships. Memberships do not include	upgrades or add-ons.
With my signature, I guarantee that all information provided in this application is true and accura application. Should any of the information change, I agree to immediately notify the Canada Gan	-
Signature Date	_

Your official date of application is the date and time when all required information for a complete application has been received by email (<a href="mailto:cap@aquatics.nb.ca">cap@aquatics.nb.ca</a>) OR when it has been dropped off at the Front Desk of the Canada Games Aquatic Centre (50 Union St., Saint John, NB).