

2025 Financial Assistance for Recreation

APPLICATION INFORMATION

| Participant name: | | | Date of Birth: | | |
|-------------------------|--|----------------------|-----------------------------|--|--|
| · | First name (please print) | Last nar | ne (please print) | (mm/dd/year) | |
| Address: | Ci | ity: | Province: _ | Postal Code: | |
| Main Phone #: _ | | Alternate F | hone #: | Email: | |
| FAMILY MEMB | ERS | | | | |
| (Please list ALL family | members that reside at the a | address above) | | | |
| | maximum 2 adults, and childre | | | | |
| | (Please Print) | LAST NAME (P | lease Print) | DATE OF BIRTH (Please Print) | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| Please submit Proof of | Income statements for all family I | members who finar | ncially contribute to the h | ousehold. | |
| Application Fo | have all of the following in rm Proof of Resident the about information or | ncy Proof | of Income Statemer | ct to the best of my knowledge. | |
| Signature: | | | Date: | | |
| | reserves the right to refuse access to right to cancel the passes and withdr | | | ation. In the event that false information is drate. | |
| | receive email communication: ties. I understand I can unsub | | | ling other financial | |
| Personal information er | ntered on this form is collected u | nder the authority o | of section 26(c) of the Fre | edom of Information and Protection of Privacy | |

portcoquitlam.ca/financialassistance

Act (FOIPPA) and will be used to assess your application. If you have any questions or concerns about how your information will be used, contact

the City's Records and FOIPPA Administrator at 604.927.5250 or corporateoffice@portcoquitlam.ca



2025 Financial Assistance For Recreation Process

| STEP 1 | Download and complete the application form at <u>portcoquitlam.ca/financialassistance</u> Provide the following: | | | | |
|--------|--|--|--|--|--|
| | 1. Completed Application Form | | | | |
| | 2. Proof of residency of Port Coquitlam. (e.g. current utility bill) | | | | |
| | 3. Proof of Income Statement from Canada Revenue Agency | | | | |
| | Income statements are required for all members who contribute to the household and are not listed as a dependent. | | | | |
| | A. Online: Get a Proof of Income statement from the Canada Revenue Services Agency website in 'My Account' 'Tax Returns' tab and select 'Proof of Income Statement' | | | | |
| | B. Order through MyCRA web app | | | | |
| | C. By mail: Call 1-800-267-6999 This method may take up to 10 days to receive by mail | | | | |
| | OR . | | | | |
| | A Community Partner Organization Reference Form | | | | |
| | (See FAQ document at <u>portcoquitlam.ca/financialassistance</u> or email <u>financialassistance@portcoquitlam.ca</u> for further assistance.) | | | | |
| STEP 2 | Submit this application with all supporting documents to: | | | | |
| JILF Z | Email: financialassistance@portcoquitlam.ca | | | | |
| | Or drop off at Customer Service at either Port Coquitlam Community Centre or Hyde Creek Recreation Centre. | | | | |
| STEP 3 | The application form will be reviewed and the applicant will be contacted within 10-14 business days regarding eligibility. | | | | |
| STEP 4 | Eligible applicants will receive: | | | | |
| | One City Pass valid for the approved calendar year. | | | | |
| | An optional scholarship for registered Recreation program fees of \$200 for each approved adult and \$500 for each approved child/youth (0-18 years). | | | | |
| | When using the scholarship money, a 75% discount is applied to the registered program fee. The approved applicant pays the remaining 25%. | | | | |
| | Funding expires December 31st of the approved calendar year. | | | | |
| | Some offerings may be not be eligible for reduced pricing (Check FAQ document for details). | | | | |
| STEP 5 | You must reapply each calendar year. | | | | |

*QUALIFYING GROSS INCOME LEVELS (Before Tax Amount based on Government of Canada's 2023 LICO Scale)

| # of people in family | Yearly Income | |
|-----------------------|------------------|--|
| 1 person | \$30,526 or less | |
| 2 people | \$38,003 or less | |
| 3 people | \$46,720 or less | |
| 4 people | \$56,724 or less | |
| 5 people | \$64,336 or less | |
| 6 people | \$72,560 or less | |
| 7 or more people | \$80,785 or less | |

For more information email: financialassistance@portcoquitlam.ca or call: (604) 927-PLAY (7529)