

LEISURE ACCESS PROGRAM APPLICATION FORM

ACCOUNT HOLDER:										
Last Name:		First Name:								
Address:		City:	Province:	Postal Code:						
Phone:		Cell Phone:	Work Phone:							
Email:	Male	Female	Date of Birth (y/m/d):							
SPOUSE:										
Last Name:		First Name:								
Phone:		Cell Phone:	Work Phone:							
Email:	Male	Female	Date of Birth (y/m/d):							
CHILDREN LIVING IN HOUSEHOLD:										
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Last Name:	First Name:	Date of Birth (y/m/d):	Male:	Female:						
Please check one:										
Family of 1 gross income <\$26,127		Family of 2 gross income <\$32,525		Family of 3 gross income <\$39,986						
Family of 4 gross income <\$48,550		Family of 5 gross income <\$55,064		Family of 6 gross income <\$62,103						
Family of 7+ gross income <\$69,143										
Option 1: You must attach proof of total family income for each person in the household over the age of 19. Please provide a copy of the following: <table border="0" style="width: 100%;"> <tr> <td>Most Current Notice of Assessment supplied by Revenue Canada</td> <td>Income Assistance Payment Stub from MHSD</td> </tr> <tr> <td>CPP/Long-term Disability Payment Stub</td> <td>BC Seniors Supplement Payment Stub</td> </tr> </table>					Most Current Notice of Assessment supplied by Revenue Canada	Income Assistance Payment Stub from MHSD	CPP/Long-term Disability Payment Stub	BC Seniors Supplement Payment Stub		
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Option 2: Ministry Approval. This applicant /family is known to me and I verify that they are residents of the Town of Ladysmith, have _____ total approved family members, and have a household income within allowable limits.				Ministry Stamp						
Staff / Social Worker Name: _____										
Staff / Social Worker Signature: _____										
You must attach proof of residency. Please provide a copy of one of the following: <table border="0" style="width: 100%;"> <tr> <td>Most recent utility bill</td> <td>Telephone or hydro bill</td> <td>Rental agreement</td> </tr> <tr> <td colspan="3">Other - Please state: _____</td> </tr> </table>					Most recent utility bill	Telephone or hydro bill	Rental agreement	Other - Please state: _____		
Most recent utility bill	Telephone or hydro bill	Rental agreement								
Other - Please state: _____										
For Office Use Only										
Processed by:										
New Applicant <input type="checkbox"/>		Renewal <input type="checkbox"/>								
Resident <input type="checkbox"/>		Income info attached <input type="checkbox"/>								

Town of Ladysmith Leisure Access Program

What is the Leisure Access Program?

The Town of Ladysmith, Department of Parks, Recreation & Culture provide a fee subsidy to Ladysmith, CVRD Area G & H residents who are in financial need. The subsidy enhances access to recreation and is available for admissions and program registration in Ladysmith. Proof of income and residency is required to determine the eligibility for the program.

Who Can Apply?

To be eligible for assistance, applicants must be residents of Ladysmith, CVRD Area G & H and have a total household income below Stats Canada low-income cutoff's, see reverse. Proof of financial status must be provided.

How do I apply?

Complete application on reverse and return it to the Ladysmith Parks, Recreation & Culture Department (Frank Jameson Community Centre). Include with your application the documentation required, see application for details.

What can the Leisure Access Program be used for?

The program includes a 50-percent reduction in cost for most programs four times per year (one per season) and 50-percent discount on facility admissions.

Town of Ladysmith Boundaries

