

PRO-Recreation Fund

APPLICATION FORM

Maximum per individual: \$200 / fiscal year | Maximum per household: \$500 / fiscal year

Applicant Information

Name of Individual: _____ Birthdate: mm/dd/yy

Name of Parent/Guardian (if applicable): _____

Mailing Address: _____

Phone: (home) _____ (cell) _____ (work) _____

E-mail: _____

Program Information

Program Name: _____

Start Date: mm/dd/yy End Date: mm/dd/yy Registration Fee: _____

Equipment Assistance Information

Is help with equipment required? Yes No If yes, what equipment is needed:

_____ Equipment Fee: _____

Proof of income

CRA Notice of Assessment (all household members aged 18+)

Total family income (line 15000) must be below the threshold for your household size. Current thresholds are listed below.

Household size: Total number of people, including children	1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 + persons
Annual income limit	\$22,512	\$38,922	\$47,851	\$58,096	\$65,892	\$74,315	\$82,739

I, _____, confirm that the information provided on this form is accurate and complete.

Personal information collected on this form will be used only to determine eligibility and administer the PRO-Recreation Program. This information will be handled in accordance with the Freedom of Information and Protection of Privacy Act and other applicable legislation.

_____ mm/dd/yy

Applicant/Parent/Guardian Signature

Date

Office Use

Approval Signature: _____ Date: mm/dd/yy Funding Amount: _____

Completed applications can be submitted in person or via mail: 2357 Highway 206, P.O. Box 120, Arichat, NS B0E 1A0, or by email to recreation@richmondcounty.ca. For assistance, phone 902.226.2400 ext. 5