

CUN	TACT INFORM	IATION – Primary A	Applicant				
Name							
	first name		last name				
Addres	ss		Postal Code				
Phone	hone DOB						
				mmm/dd/yyyy			
Email					,		
Gende	r	Male Female No	on-Binary				
How d	id you hear about the	program?					
	,						
HOL	JSEHOLD INFO	RMATION – Additi	onal Members				
			Relationship to	Date of Birth			
	First Name	Last Name	applicant	mmm/dd/yyyy	Gender		
2							
3							
4							
5							
6							
DECI	IDENOV VEDICI	CATION					
RESI	DENCY VERIFI	CATION					
	creation Access Progra of the following docum	m is only available to qualifyin	g City of Fort Saskatche	<i>wan residents</i> . Please	provide a copy		
01 <i>011e</i>	•						
	Current utility bill such as gas, phone, electrical or water, or current signed lease or rental agreement						
	Copy of a Government document with your name and address dated within the last 30 days						
INC	OME VERIFICA	TION					
		ving that applies to you:					
		ent program – AISH, CPPD, FSC	D or Income Support Pla	ease provide a conv of	the benefit		
	statement.						
		d after tax income is at or unden ncome Tax Notice of Assessme		the next page. Please	provide a copy		



Statistics Canada Low Income Thresholds (LICO - AT) 2020  Please circle one								
Number in Household	1	2	3	4	5	6	7 or more	
Income Under	\$ 24,041	\$ 29,262	\$36,435	\$45,514	\$51,763	\$57,407	\$ 63,051	

Eve	ryone Rides	: Low-inc	ome t	ransit	discount			
	I am interested	in the Transit s	ubsidy op	tion				
	I currently have				er			
Arc P	vone Rides provides urse online anytime ct to change.							
COI	NSENT							
l,							declare t	hat:
		(App	olicant na	me, please	e print)			
<ol> <li>I</li> <li>T</li> <li>T</li> <li>T</li> <li>N</li> </ol>	conditions of use. give the City of Fort The City of Fort Sask The information I ha Misuse of program penalty.	atchewan may ve provided is	contact r true.	me for mat	ters pertaining t	o this application.		ileges or
	mmm/do	d/yyyy				Signature of applic	cant	
This ir	nal Information Decla nformation has been on the purpose of evaluating the colle	ollected in accor ng eligibility and i	implement	tation of the	e City of Fort Saska	atchewan's Recreation	n Access Prog	ram. If you have
	your application has loval process may take		you will be	e contacted	to confirm what	program or facility ac	cess you are	requesting. The
				FOR OFF	CE USE ONLY			
Арр	lication Received	/ 	/ _ dd	уууу		idency provided ome provided	☐ YES	
Staf	f Signature							
Date	a Contacted	1	/					



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