

CHECKLIST – You **MUST** bring the following:

BC ID or BC Services Cards for Each Family Member

Proof of **COMOX VALLEY** Residency (Rent receipt or utility bill in the name of the applicant)

Completed Application







FOR OFFICE USE ONLY

Comox Valley Accessible Recreation Programs 2022 Application Form

Please complete this form to apply for the following programs designed to provide healthy lifestyle opportunities to Comox Valley residents facing financial challenges: PLAY (all residents); LEAP (all residents 18 & under); RAP (Courtenay residents); TRIP (Comox residents); and FAIR (Cumberland residents).

Please list	t the names of all fa	mily members re	siding in you	r househol	d that re	quire financial	assistance for	recreation.
NAMES (First & Last)					BIRTH DATE		FOR OFFICE USE ONLY	
			1	AGE				/BC SERVICES
							CARI	CONFIRMED
Primary Account Holder								
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
ADDRESS								
CITY/TOWN				POSTAL CODE				
PHONE				EMAIL				
You are eligible to receive discounts when your combined gross family income is below the following after taxes:								
Statistics Canada Low Income Measure (LIM)								
# in Household	1	2	3		4	5	6	7 & over
Income Under	\$25,153	\$35,572	\$43,566	\$50),306	\$56,244	\$61,612	\$66,549
applicable	declare that my co e) currently is estir	mated per year a	at \$		P	lease Note: y	ou may be re	•

APPLICATION PROCESS

Applications may be processed at:

- 1) CVRD Sports Centre 3001 Vanier Drive, Courtenay
- 2) CVRD Aquatic Centre 377 Lerwick Rd., Courtenay
- 3) Town of Comox Community Centre 1855 Noel Ave., Comox
- 4) City of Courtenay Lewis Centre 489 Old Island Hwy., Courtenay
- 5) City of Courtenay Florence Filberg Centre 411 Anderton Ave., Courtenay
- 6) Village of Cumberland Recreation Centre 2665 Dunsmuir Ave., Cumberland

You may bring your completed application, with supporting documentation, anytime during operating hours to one of the above recreation facilities. A customer service representative will verify your application and information and then process your application. You will be contacted via phone or email when your recreation cards are ready for pick up (from the same facility that you dropped your application off). At that time you may start using your discounts at any of the recreation facilities listed above (see details below). Each family member will need to bring their recreation card and ID when they visit each facility to obtain discounts unless they have a membership card from that organization.

BENEFITS FOR ALL ELIGIBLE APPLICANTS - LEAP & PLAY

- 1) LEAP Program Children & Youth Aged 18 & Under 52 Free Admissions to Drop-in Programs/Services/Activities at Each Organization (CVRD, City of Courtenay, Town of Comox and Village of Cumberland).
- 2) PLAY Program (All CVRD Residents) 1 free registered program per year plus an additional 4 registered programs at 50% off per family member per year (all ages) and Adults Aged 19+ receive 52 free admissions per year at CVRD recreation facilities.

ADDITIONAL COMMUNITY SPECIFIC BENEFITS - TRIP, RAP & FAIR

- 1) Town of Comox (TRIP Program) Comox Residents receive \$250 per year towards 50% discount on non-contract programs and Fitness Studio memberships.
- 2) City of Courtenay (RAP Program) Courtenay Residents receive the following: Adults: 50% up to the annual amount of \$350, Youth: 75% up to the annual amount of \$400, Children: 75% up to the annual amount of \$450. Plus, 52 free admissions to drop-in programs for adults aged 19+.
- 3) Village of Cumberland (FAIR Program) 52 Free admissions to drop-in programs for adults aged 19+.

CONSENT

Initials

Signature of Primary Account Holder

FOR OFFICE USE ONLY: Processed by:

If requested, I agree to meet with a representative of the CVRD, City of Courtenay, Town of Comox or Village of Cumberland and will at that time disclose financial information based on my Notice of Assessment from the previous year. I also give the above organizations permission to share the information on this form with each other in order to be eligible for LEAP/PLAY/RAP/TRIP/FAIR.

ADJUDICATOR INFORMATION (if required) If you are unable to provide proof of income or residency, we will accept your application if signed by a recognized adjudicator. This can include a professional in social work or family services, a school principal or counsellor, a senior recreation administrator, a healthcare professional, a spiritual leader, a lawyer or notary public, a housing assistant or support advocate.							
The individual endorsing this form below should be familiar with the applicant's financial situation as their signature verifies the financial need of the family/individual.							
Name:	Organization:	Position:					
I have thoroughly read and understand the guidelines of the LEAP/PLAY/RAP/TRIP/FAIR Programs and agree that the Household Income of this applicant is such that they require financial assistance in order to access recreation opportunities and that they live in the Comox Valley. If required I agree to participate in a brief telephone follow-up interview for verification. I can be reached at the following number at the following time(s). Phone: Good time(s) to call:							
Signature of Adjudicator	 Date	Official Stamp					
APPLICANT SIGNATURE I verify all of the information I have pro	vided on this form is accurate and true:						

Date:

Date