



SUBSIDY APPLICATION FORM

Adult Form

Personal Information of Applicant

First name:

Last name:

Age:

Email:

Address:

Phone Number:

Applicant #2

First name:

Last name:

Age:

Email:

Address:

Phone Number:

Household Information

Number of dependants?

Adults:

Children:

Is applicant receiving government assistance?

Income sources, please list all:

Net monthly earnings:

Have you applied for subsidies from other sources?

Program Information for Applicant 1

Name of org/club/program:

Organization mailing address:

Organization contact & phone #:

Start Date:

End Date:

Total Registration Fee:

Will you be requesting full subsidy or partial subsidy?

Program Information for Applicant 2

Name of org/club/program:

Organization mailing address:

Organization contact & phone #:

Start Date:

End Date:

Total Registration Fee:

Will you be requesting full subsidy or partial subsidy?

In order for us to verify your earnings, please supply a photocopy of one of the following:

- T-4 slip or other government issued documentation to verify household income
- Child Care Subsidy confirmation indicating full subsidy;
- Alberta Child Health Benefit Card;
- Confirmation from your social worker
- If you are applying for a subsidy due to an extraordinary living situation, attach a monthly household budget and explanation.

I hereby certify that the information provided on this application is true to the best of my knowledge. Further, I hereby agree that if approved for subsidy, a cheque from the Town of Redwater will be issued on my behalf to the organization offering the program.

Signature

Date

Office Use Only:

☐ Copy of third party subsidy application

☐ Earning Documentation or Monthly Budget explanation

☐ Proof of Registration

Subsidy Granted