



RECREATION ASSISTANCE PROGRAM - APPLICATION FORM

Submit by: E-mail: rap@hamilton.ca Fax: 905-546-2338 In person: Any City of Hamilton Recreation Centre

Mail: City of Hamilton, Recreation Assistance Program, P.O Box 2040, Hamilton, ON, L8P 4Y5

Hamilton

Type of Application: NEW RENEWAL (previous RAP program participant)

Step 1 – Eligibility: Approval is based on need using the Statistics Canada Low Income Measure numbers after tax (LIM). (currently using 2021)

Combined household income must be below the amount shown (line 23600)

Circle # people in household	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7+ <input type="checkbox"/>
	\$27,352	\$38,682	\$47,375	\$54,704	\$61,161	\$66,998	\$72,367

Step 2 – Household Information (Please print clearly)

Unit # _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Cell Phone: _____ Home Phone: _____

Email: _____

Does anyone who lives in the house, own a business? YES NO

Is anyone who lives in the house self-employed? YES NO

Step 3 – Household Occupants: Please name all people living in the house – use a second form if necessary. *Initials required for all people 18+ agreeing to terms in Step 7

Married Common Law Widowed Divorced Separated Single

First Name	Last Name	Date of birth	Please Initial * terms in Step 7	Barcode
Applicant		(dd/mm/yy)		
Spouse/ Partner				

Other People in Home (list everyone including parents, grandparents, siblings, adult children, kids etc.)

First Name	Last Name	Date of birth	Initials ages 18+	Barcode
		(dd/mm/yy)		

Step 4 – Support Needed (benefits are for 12 months)

For Families (with children under 18)- all are included

Free Family Participation Pass (valid for drop-in programs)

Free Family Skating Pass (valid for drop-in skating)

90% off Rec Centre program registrations up to \$150/child

50% off minor sport registration (max \$100, ice sports \$150)

65% off up to 15 days of Camp Kidaca (year-round programs)

OR

For Adults/Seniors (no children at address)

CHOOSE ONE

75% off Participation Pass

75% off Skate Pass

50% off Waterfit Pass Yr/Mth

Office Use Only **Date:** _____

V.2 Year _____ NOA \$ _____

Received Check Legend Mem Admin Online

Drug Card _____ OW ODSP POR DL Lease Bill Bank Other _____

Received _____ Approved _____ Notified _____

Mail Counter Centre Fax Email EM

Step 5 – Attach proof that you live in the City of Hamilton

Send a photocopy of **ONE** of the following which lists your current address:

- Valid Driver's License or Ontario Photo ID card (we **do not** accept Health Card)
- Property tax bill or Current Tenancy/ Lease agreement
- Current utility bill (phone, gas, hydro, cable) dated within the last 30 days

Step 6 – You must provide a copy of 1 or more of the following to prove your household income:

A Most Current Government Issued Notice of Assessment Showing line 23600 for all adults in the house

Notice of Assessment form showing details like Notice details, Notice of assessment, and Account summary.

B Child Tax Benefit Statement with the family net income

Canada Child Tax Benefit Statement showing tax benefits and account summary.

C GST/ HSTC Notice with the family net income

Goods and services tax/harmonized sales tax credit (GST/HSTC) notice showing account summary and detailed explanation.

If you do not have these papers, contact Canada Revenue Agency 1-800-959-8281

D Permanent Residency Papers dated within the last year for everyone

Confirmation of Permanent Residence form with sections for Personal Details, Application Details, Medical Details, Sponsor Information, and Dependent Information.

E Ontario Works/ Disability Eligibility Card – with the names of everyone in the house or a printout from your online "My Benefits" account

Eligibility Card showing Member ID Code, First Name, and Surname for multiple individuals.

F Any full-time student Supported by a parent/ Guardian can provide proof of full-time school enrollment

McMaster University student ID card for Jane Doe, 2018-2019, with a photo and barcode.

RAP benefits are for 12 months. Please space out your funds accordingly as you will not be given additional funds before your expiry date.

Incomplete applications will not be processed. Please contact the office for updates.

If you are unable to provide any of the requested information, but feel you would be eligible for this program, please contact the office to discuss.

* Step 7 – Applicant Signature

- I give the City of Hamilton permission to verify the information provided in this application with all necessary sources for the purpose of assessing my application.
- I certify that the information I have provided on this application is truthful, complete and to the best of my knowledge. Misuse of program privileges or misinformation provided on this application form may result in loss of privileges or penalty. *Additional information may be required to verify eligibility.*
- I understand that the collection, use, disclosure and destruction of all information submitted on this form is governed by Ontario's Municipal Freedom of Information and Protection of Privacy Act.
- If I or anyone in my household has a change in circumstances (e.g. change of address, new job etc.) that changes the information provided in this application, I will immediately notify the City's Recreation Department at the number below. I understand that changes may result in a reduction or loss of privileges.

Signature: _____ Date: _____

Questions? Call: 905-546-2424 ext. 4569 or Email: rap@hamilton.ca