



"Can I Play Too?"

Municipality of Southwest Middlesex -- Facilities and Recreation Department

The "Can I Play Too?" program has been established to support families in Southwest Middlesex to enable the participation of children in community recreation programs. The emphasis will be placed on supporting programs offered in Southwest Middlesex by paying the registration cost for children of families in financial need. The subsidy is paid directly to the Community Recreation Program. The Department reserves the right to fund any amount of the Subsidy request or to deny said request.

NAME:	
ADDRESS:	
<i>Postal Code</i>	<i>Phone:</i>
PROGRAM NAME:	
PROGRAM ADDRESS:	
CHEQUE PAYABLE TO:	
CHILD (REN)'S NAME:	
SUBSIDY AMOUNT REQUESTED:	
Statement of Eligibility: This subsidy program is intended to assist children from Southwest Middlesex families whose financial situation limit a child's ability to participate in community recreation programs. By signing this form you are stating that this family meets this criteria and, if requested, would provide further documentation.	
SIGNATURE OF PARENT(S) OR GUARDIAN(S):	DATE:

For Office Use Only:	
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Amount: _____	Date: _____
Other applications for this family:	
Date: _____	Amount: _____

ALL INFORMATION IS COLLECTED UNDER THE MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

RECREATION AND FACILITIES DEPARTMENT, 138 MILL ST, P.O. BOX 693, GLENCOE ONTARIO, N0L 1M0
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Municipality Of Southwest Middlesex
“CAN I PLAY TOO?” PROGRAM SUBSIDY
STATEMENT OF INCOME

All information will be used solely for the purposes of determining the financial need of persons applying for the “Can I Play Too?” subsidy.

FAMILY INFORMATION

Last Name:	Father:	Mother:
Address:	Postal Code:	
Phone Number: home & Father/Mother work #'s		No of Children:

EMPLOYMENT (include all full and part-time employment)

Father's Employment:	Position:	Monthly Net Income:
Mother's Employment:	Position:	Monthly Net Income:

OTHER MONTHLY INCOME (include rent, alimony, child support, Disability benefits, E.I., Ontario Works or Ontario Disability Support Program and all other income sources other than employment)

Father's Other Income:	Source:	Monthly Net Income:
Mother's Other Income:	Source:	Monthly Net Income:

We/I certify that the above information is correct.

Father's Signature:	Date:
Mother's Signature:	Date:
Facilities & Recreation Manager Signature:	Date:

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