



Application # \_\_\_\_\_

## Application for financial assistance-PROVINCIAL RECREATION ACCESS FUND

Please complete all boxes clearly. Applications will be reviewed on a quarterly basis (*June 15 / September 14 / December 14 / March 15*). Grants are available to a maximum of \$250. Priority will be given to first time applicants. Support will be provided only to recognized activities.

1. Name of applicant:		
2. Home phone:	3. Work phone:	4. Email:
5. Complete mailing address:		
6. Name of activity:		
7. Complete mailing address of lead organization (where cheque is to be mailed):		
Contact person:	Phone number:	
8. Start date of activity:	9. End date of activity:	
10. Briefly describe the activity, including any related costs:		
Total amount requested? \$		
11. How will you benefit from this activity?		
12. Please check all that apply to you (the participant):		
<input type="checkbox"/> children (0 - 9)	<input type="checkbox"/> youth (10 - 24)	<input type="checkbox"/> adult (25 - 59)
<input type="checkbox"/> senior (60+)	<input type="checkbox"/> aboriginal	<input type="checkbox"/> low income
<input type="checkbox"/> male	<input type="checkbox"/> female	<input type="checkbox"/> person with a disability (type) _____
13. Did you lead an active lifestyle before obtaining assistance from the Provincial Recreation Access Fund? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If so, how?		
14. Where did you hear about the Provincial Recreation Access Fund?		
15. Do you agree to provide a written summary of your experience upon completion of this activity? Yes <input type="checkbox"/> No <input type="checkbox"/>		
16. Recreation NB is not responsible for any injury, or other misfortune while participating in this activity. Do you agree to waive any and all liability for Recreation NB? Yes <input type="checkbox"/> No <input type="checkbox"/>		
17. Signature:	18. Date:	

