

The Town of Peace River is pleased to offer supports for recreation and transportation to Refugees settling in our community. As situations evolve the Federal Government may create immigration categories other than Refugee to assist those fleeing war, therefore this program will include those categories as they develop. Questions about qualifications, documentation or general program questions should be directed to the Community Services Department, (780)624-1000.

- Applicants must provide an immigration document that supports their status, such as a Refugee Protection Claimant Document, Canada-Ukraine Authorization for Emergency Travel, or similar document.
- Applicants must provide proof of residency, for example a lease, a letter from a landlord or sponsoring organization/family who the applicant resides with.
- Recreation supports are available for residents of the Town of Peace River, Northern Sunrise County, MD of Peace and County of Northern Lights. The Taxi Pass Program is limited to residents of the Town of Peace River only.
- Approvals will be for 6-month terms, up to one year. After the first 6-month term applicants will need to reapply to be approved for a second term.

### NAMES OF APPLICANTS:

(One application should be submitted for a household, please list all family members. If more space is required, please attach another page to this application.)

First Name	Last Name	Birth Date

### MAIN CONTACT FOR HOUSEHOLD (who should we contact about the application?)

<b>Name:</b>	<b>Phone Number:</b>
<b>E-mail Address:</b>	
<b>Mailing Address:</b>	

**SPONSOR INFORMATION (We may contact the sponsor if we need further information or if we are unable to contact the applicant.)**

<b>Name of organization or individual sponsoring:</b>	<b>Contact person if organization:</b>
<b>E-mail Address:</b>	<b>Phone Number:</b>

**SUPPORTS REQUESTED:**

\*Please note that Champions Fitness Centre in the Baytex Energy Centre is not operated by the Town of Peace River, and we are not able to offer passes to their facility.

- Peace Regional Pool Swim Passes** Choose one:  Family or  Individual  
Pool passes are issued for 6 months and cannot be changed to a different type of pass.
- Baytex Energy Centre Drop-In Program Passes** Choose one  Family or  Individual  
Drop-In Program Passes are per use 10-punch passes and will be issued one at a time up to a maximum of 4 total passes for a 6-month period.  
When requesting your next pass, you may choose either a family or individual depending on your needs.
- Baytex Energy Centre Indoor Track Passes**  
Track Passes are per use 10-punch passes and will be issued one at a time up to a maximum of 4 total passes for a 6-month period.  
When requesting your next pass, you may choose either a family or individual depending on your needs.
- Taxi Pass Program** Please indicate the number of adults (18 or older) in the household: \_\_\_\_\_  
The Taxi Pass Program provides subsidized Taxi rides, up to a maximum of \$300 per month. More information: [www.peaceriver.ca/taxi](http://www.peaceriver.ca/taxi)

**Supports Available under the Community Scholarship Program for Youth**

A maximum of up to \$100.00 is available per child per year.

- Swimming Lessons for Children under 18
- Summer Programs, Summer Fun (ages 6-9) and Camp Adventures (ages 9-12)

For information about other organizations providing funding for recreation please visit [www.peaceriver.ca/fcss](http://www.peaceriver.ca/fcss) and select Youth Sport Funding Assistance.

The information on this form is being collected in accordance with Section 33(C) of the Freedom of Information and Protection of Privacy Act (FOIP) for the purpose of administering the Refugee Support Program. This information is protected by the privacy provisions of the FOIP Act.

If you have any questions about the collection or use of this information, please contact the FOIP Coordinator at the Town of Peace River, at P.O. Box 6600, Peace River Alberta, T8S 1S4, 9911-100 St, or phone 780-624-2574.

**OFFICE USE:**

**Attach copies of supporting documents to this form.**

<b>Date Application Received:</b>	<b>Supports Approved Until:</b>
<b>Supports Provided:</b>	
<input type="checkbox"/> Peace Regional Pool Swim Passes. Type of Pass: <input type="checkbox"/> Family or <input type="checkbox"/> Individual	
<input type="checkbox"/> Baytex Energy Centre Drop-In Program 10-Punch Passes, maximum of 4. <input type="checkbox"/> Family or <input type="checkbox"/> Individual	
<input type="checkbox"/> Baytex Energy Centre Indoor Track 10-Punch Passes. <input type="checkbox"/> Family or <input type="checkbox"/> Individual	
<input type="checkbox"/> Taxi Pass Program.	
<b>Community Scholarship (if more than 3 children check box and continue list on back of page):</b>	
Child Name: _____ Amount approved: _____	
Program Approved: _____	
Child Name: _____ Amount approved: _____	
Program Approved: _____	
Child Name: _____ Amount approved: _____	
Program Approved: _____	
<input type="checkbox"/> More children listed on next page	
<b>Notes:</b>	
<b>Director of Community Services Signature:</b>	<b>Date:</b>