

# Equitable Access Program Application

The MNjcc is proud to offer financial assistance for our fitness memberships and programming for those in financial need. We currently offer subsidies for our Fitness Memberships, Music programs, Jewish life programs, Access and Inclusion programs, Toronto Jewish Film Society subscriptions, and Freddie Shore Learn to Swim Group Swim Lessons. Applications are based on your household's current financial circumstances. **Applications without the required supporting documentation will not be considered.**

Subsidy amounts and program policies are subject to change based on funding availability and number of applicants. **Please allow 4 weeks processing time for applications. The Program coordinator will contact you as soon as your application has been assessed.** Your application must be approved before registering for a Membership or Program; refunds for the difference in price will not be provided. All program and membership participants are subject to the terms and conditions of MNjcc's Code of Conduct. Violations of these terms may result in termination from the Equitable Access Program and the MNjcc.

Please list everyone applying for assistance:

Last Name	First Name	Date of Birth	Age	Gender
		mm/dd/yyyy		
		mm/dd/yyyy		
		mm/dd/yyyy		
		mm/dd/yyyy		
		mm/dd/yyyy		

## Primary Contact Information

Name: \_\_\_\_\_ Number of people supported by income: \_\_\_\_ (include all dependants 17 and under)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Marital Status\*: \_\_\_\_\_

## Required Documents

Supporting documents are required to show your household's income. We no longer require expense information. Applications submitted without supporting documents will not be assessed. All supporting documents are destroyed upon completion of the assessment. Please DO NOT submit originals, only photocopies. Please ensure your name and address are displayed clearly on your documentation. Questions can be directed to Wendy Moss, wendym@mnjcc.org 416-924-6211x231. I have attached:

### EITHER

- Notice of Assessment\* (self) and
  - Notice of Assessment\* (partner, if applicable)
- \*Most recent tax year is required.

### OR

- 1 month's worth of income statements from:  
(Including the portion with your name and address)
- Ontario Disability Support Program (ODSP)
- Ontario Works (OW)
- Employment Insurance (EI)
- Guaranteed Income Supplement for Seniors (GIS)
- Letter from shelter|Transition Home| JF & C

**SEE OVER**

## Fitness Membership Assistance

The following people are applying for fitness membership assistance: \_\_\_\_\_

### Program Assistance

We currently offer assistance for our Music programs, Jewish Life programs, Access and Inclusion programs, Toronto Jewish Film Society subscriptions, and Freddie Shore Learn to Swim Group Swim Lessons. Please indicate below which specific programs you want to register for:

Participant	Session	Program	Participant	Session	Program

How did you hear about our Equitable Access Program? \_\_\_\_\_

Additional information so we can serve you better: \_\_\_\_\_

Should this information be communicated to front line staff:  Yes  No

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I verify that the information submitted is correct and accurate. If my situation changes, I agree to notify the MNjcc within 30 days. If I submit false or inaccurate information, or fail to notify the MNjcc of any changes within 30 days, I understand that my acceptance in the Equitable Access Program may be terminated.

### Office Use Only

Total Income: \_\_\_\_\_ Family Size: \_\_\_\_\_

Member Name	Program(s)	Regular Rate	Assisted \$	% Discount	In CSI

Main Member #: \_\_\_\_\_ Received: \_\_\_\_\_ Additional Documentation: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Final Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Member Notified of approval via (email/letter/phone call): \_\_\_\_\_ Date: \_\_\_\_\_

Not Approved (email/letter/phone call): \_\_\_\_\_ Date: \_\_\_\_\_

Over cut-off  Insufficient Documentation



The MNjcc is committed to accessibility. Please let us know in advance if you have any accommodation needs: [inclusion@mnjcc.org](mailto:inclusion@mnjcc.org); (416) 924-6211

