



Year : 20____

Reception date :

By :

ASSISTANCE FOR FAMILIES (PERMANENT RESIDENTS) TO ENCOURAGE ARTS & ATHLETIC ACTIVITIES FOR CHILDREN AGED 0-17

IDENTIFICATION OF PARENTS			
FATHER		MOTHER	
last name	first name	last name	first name
Address		Address	
Tel:		Tel:	
Mobile		Mobile	
email		email	

IDENTIFICATION OF CHILD		
last name	first name	date of birth
ACTIVITY		
Name of enterprise/municipality/organization		Type of activity
Address	Start date	end date
Tel:	Total activity cost:	

ATTACH SUPPORTING DOCUMENTS :
____ PROOF OF RESIDENCE
____ PROOF OF BIRTH DATE
____ ORIGINAL INVOICE

We may contact you for additional information. Applications will be processed internally. If you are eligible, we will mail you a cheque (maximum \$100 per child/year)

for administrative use only	
Request processed on	by
accept rejected reason	
cheque # Amount \$	
Date of cheque	Signature

GENERAL INFORMATION

Documents must be received no later than November 30, accompanied by the required supporting documents.

Documents that will be accepted:

- Recent (less than 3 months) utilities bill (phone, electricity, gaz, etc)
- Report card (current school year)

- Quebec health insurance card (RAMQ)

* Hospital cards will not be accepted as proof of residence.

Attach a copy of your documents to the application form

The following information must be clearly indicated on the invoice:

- Supplier contact information (name, address, tel. No.)

- Child's name (1 invoice per child)

- Period (start and end date of activity)

* "Blueline" type of receipts will not be accepted

Mail in your documents or bring them to the Mayo municipal office at 20 McAlendin Road

819-986-3199 ext. 1

mun@mayo.ca

Monday to Thursday 8 h am to 4 h pm

Friday 8h00 until noon