

FEE ASSISTED RECREATIONAL EXPERIENCES (FARE) 2026 APPLICATION FORM



RENEWAL NEW

Preferred Contact Method:

Email Phone

Section 1 – Primary Applicant’s Information (ADULT) PLEASE PRINT			
Last Name:	First Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: (mm/dd/yyyy)
Home Phone:	Alternate Phone:		
Address:			Unit #:
City:		Postal Code:	
Email:		Family #:	
Emergency Contact Name:		Emergency Contact Number:	

Section 2 – Family Please list all persons living at the above address.		Gender	Date of Birth (mm/dd/yyyy)
Spouse/Partner Last Name:	First Name		
Dependent Family Members Last Name:	First Name		
Last Name:	First Name		
Last Name:	First Name		
Last Name:	First Name		

Section 3 – Eligibility Assistance is awarded based on need, using the Statistics Canada Low Income Cut – off (LICO) level. Total family household annual income needs to be below the LICO to be approved for the Fee Assisted Recreational Experiences program.						
Circle the # of people in your household to see which figure applies to your family						
1	2	3	4	5	6	7+
\$23,907	\$29,761	\$36,587	\$44,424	\$50,384	\$56,825	\$63,266

Eligibility for the Recreation Fee Assistance Program must be renewed every year.

*(Source: 2023 Statistics Canada. Table 11-10-0241-01 Low income cut-offs (LICOs) before and after tax by community size and family size, in current dollars)

FOR OFFICE USE ONLY

Review Date: _____

Approved By: _____

Administration:

- _____ Account Created & Login Activated
- _____ FARE Membership Applied (each family member)
- _____ Subsidy Applied (each family member)

- Primary Contact Notified of Application Status
- FARE Application saved in Account

Section 4 – Proof of Residency in Oxford County (provide ONE document)

Acceptable Documents must show name and current address. Please check off which one you are submitting (photocopy only).

- Copy of current Driver’s License or
- Copy of Property Tax bill or dated tenancy agreement, dated within the previous 30 days or
- Copy of current utility bill or bank statement, dated within the previous 30 days

Section 5 – Proof of Total Annual Family Income (provide ONE document)

Required for each primary applicant and spouse/partner, for a one year period. Any documents other than those listed will **not be accepted**. Photocopies only please.

Acceptable Documents: (indicate which you are attaching)

- Copy of Current **Notice of Assessment (Government issued)*** for each adult in household or
- Copy of Ontario Works Drug Benefit eligibility Card **
- Copy of Ontario Disability Support Program Drug Card **

*Notice of Assessment is a copy of the current official Canada Revenue Agency Notice of Assessment for each adult in the household, showing total income (line# 150). If you cannot find your Notice of Assessment, call the Canada Revenue Agency at 1-800-959-8281 and request documentation from them showing line #150.

** Must have the names of every adult and dependent in the family to be used as proof of income.

If you are unable to provide any part of the documentation required, but feel you would otherwise still be covered by this program, please contact the F.A.R.E. Coordinator to discuss your options.

Section 6 – Application Signature (Application will not be processed without signature and date)

The collection, use and disclosure of personally identifying information submitted on this form is governed by the Municipal Act. Personally identifying information will be used by the Town of Tillsonburg to assess eligibility of the applicant for the Fee Assisted Recreational Experiences Program, administration and evaluation of the program and for statistical purposes. Applicants may, from time to time, be contacted by the Town of Tillsonburg for the express purposes of assessing satisfaction and/or obtaining feedback on the applicant’s personal identifying information. Questions about this collection, use and disclosure should be directed to the Town of Tillsonburg Program Manager.

You are responsible for following the rules of the Fee Assisted Recreational Experiences Program. The Criminal Code of Canada states that everyone who by deceit, falsehood or other fraudulent means defrauds the public of any property, money or valuable security, is guilty of an offence. If there is sufficient evidence to suspect that fraud, or an offence has been committed, the matter may be referred to the police for investigation.

The information I have provided is complete and true, and I am a resident of Oxford County.

Applicant or Guardian’s Signature

Date: mm/dd/yyyy

Do you consent to receiving electronic communications, including marketing and promotional emails, in compliance with the Anti-Spam Act, understanding that you may unsubscribe at any time?

- Yes, I consent.**
- No, I do not consent.**

Your completed application form, with all required documentation can be dropped off at the Town of Tillsonburg Community Centre in an envelope marked: **Town of Tillsonburg Fee Assisted Recreational Experiences Program, 45 Hardy Avenue, Tillsonburg, ON N4G 3W9**

For help with this form, please contact us at 519-688-9011 and ask to speak with the Coordinator of the Fee Assisted Recreational Experiences Program