INSTRUCTIONS FOR P2P SUBMISSION:

- 1. RMHA receives limited funding to be used for this subsidy. The earlier you apply the better your chances are of receiving this assistance.
- 2. Each application must be complete or it will be rejected.
- 3. Each application must include a copy of your most recent CCTB / NCBS. The date should be calendar 2017.
- 4. Co-payment of \$250 cash or credit card included with form.
 - a) If paying by credit card please provide the following information:
 - i. Name on card
 - ii. Card number
 - iii. Expiry date
 - b) If paying by cash contact the Registrar to arrange payment (5192597447 or amschofield22@gmail.com)

NOTE: Families applying for P2P funding must review the table below. If your maximum income exceeds the level in this chart you cannot be approved for P2P funding and must find an alternate subsidy.

<u>LOW INCOME CUT-OFF</u> PATHWAY TO POTENTIAL PROGRAM PARTICIPANTS

SIZE OF FAMILY UNIT	MAXIMUM FAMILY INCOME LEVEL
1 PERSON	\$21,487
2 PERSONS	\$26,748
3 PERSONS	\$32,884
4 PERSONS	\$39,926
5 PERSONS	\$45,282
6 PERSONS	\$51,073
7 OR MORE PERSONS	\$56,861

Chart is based on Stats Canada – Low income cut-offs (1992 base) before tax for the most current year available (2016). Community size 100,000 to 499,999.

OFFICE USE ONLY:	
Rec'd by:	Rec'd on:



2018-19 RMHA PATHWAY TO POTENTIAL APPLICATION FORM



Name of NCBS Parent or Guardian:
Children Name: ONE form per child
Birth Date (dd/mm/yy):/
Gender: Male Female Age: Age:
Address:
City: Province:
Postal Code: Telephone: ()
Email:
Please indicate that the following have been included with this application: □ Copy of most recent CCTB (child tax benefit 2017) and OCB (Ontario child benefit) notice □ Copy of child's birth certificate if new member I certify that all the information given is correct. Signature Parent of Guardian:
Date:
Submit by mail to Registrar, 367 Betty Dr; Windsor ON; N8S3W9
OFFICE USE ONLY:
Rec'd hy: