

LIFE PROGRAM APPLICATION FORM

(City of Penticton Residents Only)

Family Members & Dependents (including Main Contact):

First Name	Last Name	Date of Birth mm/dd/yy	OFFICE USE		
			Photo ID	Proof of Residency	Verified Financial

Household Information:

Name of Main Contact _____ Email: _____

Address: _____ Postal Code: _____

Phone (primary): _____ (alternate): _____

Have you previously participated in the LIFE program? Yes _____ No _____

Your **total household income after-tax** must be at or below the following income thresholds to be eligible for the LIFE program

Statistics Canada Low Income Threshold *2024 Rates							
No. In Household	1	2	3	4	5	6	7 or more
Income Under	\$21,637	\$26,336	\$32,793	\$40,913	\$46,588	\$51,668	\$56,746

Consent Form:

I declare that the above information to be true to the best of my knowledge and understand that subsidies will be cancelled if the information provided is discovered to be false.

Self Declaration:

- 1) Total household annual income after-tax is \$ _____
- 2) I am not a post-secondary student.

Personal Information Declaration

The information on this form is collected under the authority of the Local Government Act. The information provided will be used to evaluate eligibility for participation in the City of Penticton LIFE Program. If you have any questions about the collection and use of this information, please contact the Community Centre front desk at (250) 490-2426.

I have read, understand and agree to the contents of this application form.

Signature: _____ Date: _____

- ☐ Your combined after-tax household income falls at or below the “Low Income” levels recognized by Statistics Canada.
- ☐ You must be a resident of the City of Penticton or Penticton Indian Band (PIB) lands.
- ☐ You must have resided in the City of Penticton or PIB lands for at least 3 months.
- ☐ You are not a post-secondary student.

How to Apply:

1. Please complete the LIFE Program Application Form and bring all required documents to the Penticton Community Centre. Make sure all information is accurate, sign the application and date it. Any omissions may result in processing delays

Required Documents:

- ☐ **Proof of Residency:** Please bring approved proof of residency of 3 months or longer (i.e. phone bill, utility bill).
- ☐ **Photo ID:** Please bring your photo ID (BC Driver’s License or BC Identification Card)
- ☐ **Proof of Income:** Please bring one of the following:
 - Ministry of Social Development and Poverty Reduction (MSDPR) financial assistance, confirmed by one of the following:
 - Official MSDPR stamp
 - Completed MSDPR release of information form (SD0095)
 - My Self Serve online access (learn more at MySelfServe.gov.bc.ca)
 - Latest notice of assessment – Line 23600 Net Income for EACH adult in the house
 - Canada Pension Plan Disability Benefit T4A(P) form - Box 16
 - Referral from an authorized agency

2. Applications will be reviewed and upon approval you will receive notice. Please allow 2-4 weeks for processing.

3. Once you receive approval notice, visit the Penticton Community Centre to set up your LIFE Pass Account.

As a LIFE Program participant, you will receive a card that entitles you to the following:

- 24 complimentary admissions to swimming, aquafit, skating (includes skate rental), Fitness Room, fitness drop-in sessions, or drop in sports per year.
- 24 half-price admissions to swimming, aquafit, skating (includes skate rental), Fitness Room, fitness drop-in or adult drop in sports sessions per year. Present your card at time of admission.
- 50% reduction in program fees, two programs per year, to a maximum of \$25.00 per program. Some programs are not eligible for the LIFE program. Present your card at the Community Centre Reception Desk at the time of registration.
- One complimentary set of swim lessons per year for children 4 months to 12 years of age.

LIFE cards will be issued to each member of eligible families and are valid for one year from the date of issue. New applications must be submitted after the expiry date as no extensions will be made past the expiry date. **Cards are not transferable and have no cash value. One card is issued per year for each eligible family member.** If lost or misplaced, the first replacement card will be issued at no charge, subsequent replacements will be charged as per the fee schedule.

FOR OFFICE USE ONLY			
Application Received by _____	/	/	
	Month	Day	Year
Approved ☐	Denied ☐	_____	
		Approval Signature	Date
Membership processed by _____	Applicant notified _____		
		Date	
LIFE Card expiry date _____	/	/	
	Month	Day	Year