



APPLICATION FORM

RESIDENTS OF TRAIL, WARFIELD, BEAVER VALLEY & ELECTORAL AREA A

In order for applications to be processed, **TWO** of the following pieces of documentation must be provided at the time of processing: a property tax notice, a utility bill (not including a telephone bill) and/or a driver's license.

Applications will be processed at the Trail Aquatic & Leisure Centre

PERSONAL INFORMATION

Primary Account Holder Information

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone #: _____ Birthdate: _____

Email: _____

Please choose which is applicable: **OWN** **RENT**

List all other people who permanently reside in the household. Anyone over 19 will need to produce one form of identification verifying they live at this residence.

Name	Birthdate
1.	
2.	
3.	
4.	
5.	
6.	

I, the undersigned, acknowledge that all people included as part of this residency card application are members of my family as outlined in Bylaw 2795. I recognize that providing fraudulent information or using the residency card in a fraudulent fashion will result in loss of residency privileges for all parties noted on this application form.

Applicant Signature

Print Name

Date Signed

OFFICE USE ONLY

Documents used for residency verification (2 must be provided):

Property tax notice Roll# _____ Drivers License # _____

Utility Bill Acct # (phone bill not accepted) _____

Information entered into perfect mind TRP tile is green Verify Residency for each person All resident cards printed

Date Processed: _____

Staff person: _____