

Chilliwack Children's Foundation – Application for Financial Assistance

See website for further information: www.chilliwackchildrensfoundation.ca

Are you eligible?

- The Chilliwack Children's Foundation considers all individuals and not-for-profit societies that work with local youth for assistance in the areas of programs or equipment acquisition that will improve the social, health or educational welfare of the youth in the City of Chilliwack.
- Children up to and including the age of 18 years (and school pupils of any age) are eligible.
- The applicant must reside in the City of Chilliwack.

Name:	_____	Parent(s)/Guardian(s):	_____
	Last name, First name		Last name, First name
Birthdate:	____/____/____.		_____
	DD / MM / YYYY		Last name, First name
Address:	_____/_____/_____/ Chilliwack, BC / _____.		
	Apt/Unit #	Street Number	Street Name
			Postal Code

Help Requested:

- Provide description and include cost and/or cost estimate

_____ Cost: \$ _____

If request approved, make cheque payable to: _____.

(Please attach additional sheet, if not enough space is available above).

Family Economic Situation:

- Provide description with supporting documentation of monthly income and expenses (ex. tax returns, statements from income providers etc.)

Name of Doctor, Dentist and/or Optometrist:

Last name, First Name

Name and signature of Support Worker/Agency:

Last name, First Name

Mail/Email Requests and supporting documentation to:

Chilliwack Children's Foundation
#201 - 7108 Vedder Road
Chilliwack, BC V2R 0T8

E: info@chilliwackchildrensfoundation.ca
P: 604-793-2903

Registered Charity #1013028-63

