



Inclusion Membership Discount Application Form

The Community Services Department is committed to increasing access and participation in recreation for Clarington residents by offering financial assistance and accessible programming.

If you meet the criteria for an annual membership and have a disability, you are eligible to apply.

Adults (18+ years) are eligible to purchase an annual facility membership at the "senior rate" (currently 50 per cent discount). Youth (13-17 years) and Seniors (55+ years) are eligible to purchase an annual membership with a 20 per cent discount.

Approved applicants with a permanent disability are eligible to access the discount indefinitely; there is no re-application process. Those with a temporary disability will be required to reapply annually.

The statements made below are, to the best of my knowledge, complete and accurate. I understand that Municipal staff will contact the references and that approval of this application depends upon verification that the applicant is a person with a disability (according to Statistics Canada definition).

Last Name		First Name	
Email Address (communication will be sent via-email)		Date of Birth (yyyy/mm/dd)	
Home Phone		Cell Phone	
Address (Street Number / Street Name)		Suite / Apartment / Unit	
City / Province		Postal Code	

At present, this program does not require a medical certificate for IMD eligibility. It is necessary to have verification whether your disability is permanent or temporary. A professional reference is required. The references must be people who know that the applicant meets the criteria: for example, occupational therapist or physiotherapist, doctor, etc.

Please provide your reference with the form on page 2 of this application form. Ensure the form is appropriately signed.

Please **return your completed application, including professional reference** to the address below, or return in person to the Customer Service desk at one of the facilities listed below.

***Access to Recreation – Confidential
Municipality of Clarington
Community Services Department 40
Temperance Street Bowmanville, ON
L1C 3A6**

Alan Strike Aquatic & Squash Centre, 49 Liberty Street N, Bowmanville ON
Courtice Community Complex, 2950 Courtice Road North, Courtice ON
Diane Hamre Recreation Complex, 1780 Rudell Road, Newcastle ON
Garnet B. Rickard Arena, 2440 Hwy 2, Bowmanville ON
South Courtice Arena, 1595 Prestonvale Road, Courtice, ON

All information will be treated as strictly confidential. You will be contacted within 15 days of receipt.

Personal information provided is collected under authority of the Municipal Act, R.S.O. 2001, c.25, s.103, and will be to determine eligibility purposes only. Questions about this collection should be directed to the Deputy Clerk, 40 Temperance Street, Bowmanville, ON, L1C 3A6, 905-623-3379.



To the Attending Physician,

The Municipality of Clarington offers the Inclusion Membership Discount in the hopes of increasing access and participation in recreation activities among Clarington residents. We are committed to removing barriers to participation in recreation and providing leisure opportunities for all by offering accessible programs.

To qualify for the Inclusion Membership Discount (this is a financial incentive for participants with a permanent or temporary disability) applicants are required to provide a professional reference. The reference must be a person who knows the applicant meets the criteria of the program. For example, occupational therapist or physiotherapist, doctor, etc.

Last Name	First Name	Date of Birth (yyyy/mm/dd)
Address	City/Town	Postal Code

We ask that you complete the questions 1 and 2, sign and date, for this applicant and provide them with the completed form.

1. Is their disability: ☐ Temporary ☐ Permanent

2. Is the disability eliminated using a technical aid? (e.g. eye glasses): ☐ Yes ☐ No

Professional Reference Name: _____

Occupation: _____

Phone Number: _____

Signature: _____ Date: _____

Thank you in advance for completing this form. If you have any questions, please feel free to contact us at the number below.

Community Services Department

Municipality of Clarington

Phone: 905-623-3379 ext. 2552

Email: subsidy@clarington.net

Fax: 905-623-6547