

LIFE APPLICATION FORM 2026 FOR RESIDENTS OF THE TOWNSHIP OF ESQUIMALT

When applying for the LIFE Program, please provide the following:

| | | |
|---|--|--|
| <input type="checkbox"/> 1. Current Canada Revenue NOA (Notice of Assessment) listing line 15000 as it appears on the assessment. [To obtain a copy of your NOA call Revenue Canada at 1-800-959-8281 or visit http://www.cra-arc.gc.ca/myaccount .] | <input type="checkbox"/> 2. Proof of current residency (i.e., rental agreement, recent hydro or other bill showing your name, address and dated in the last three months.) | <input type="checkbox"/> 3. Government issued ID with photo identification (BC Services Card, BC ID, or Driver's License). |
|---|--|--|

PERSONAL INFORMATION

PRIMARY APPLICANT:

BIRTH DATE:

ADDRESS:

POSTAL CODE:

E-MAIL:

HOME PHONE:

CELL PHONE:

PROGRAM OPTIONS and DEPENDANTS

| FAMILY MEMBERS Including applicant's name | AGE | BIRTH DATE MM/DD/YY | PLEASE SELECT PROGRAM OPTION | |
|---|------------|-------------------------------|--|--------------------------|
| | | | Option 1 See Page two for option details | Option 2 |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |

To be eligible for participation in the LIFE Program, gross income must be below the following income ranges with proof provided. Proof of combined income will be required in circumstances for married/common-law settings.

| Low Income Thresholds - 2026 LIFE Program | | | | | | | |
|--|----------|----------|----------|----------|----------|----------|------------------|
| # IN HOUSEHOLD | 1 | 2 | 3 | 4 | 5 | 6 | 7 or more |
| INCOME UNDER | \$29,640 | \$38,493 | \$47,145 | \$55,076 | \$62,464 | \$70,451 | \$78,436 |

LIFE passes will be cancelled if this information is discovered to be false.

SELF DECLARATION and CONSENT:

I agree to bring my LIFE pass at each visit, otherwise I will be charged a drop-in admission at the regular rate. As a pass holder, I consent to abide by the rules of the facilities where I participate, and I am aware that failure to do so may result in my pass being revoked. In addition, information will be shared with other participating facilities, and a ban from one facility may be extended to all participating facilities.

I, _____ (PRINT NAME) declare all the above information to be true to the best of my knowledge.

Personal information contained in this form is collected under Section 26 (c) of the Freedom of Information and Protection of Privacy Act and will only be used for the form's stated purpose. If you have any questions about the collection or use of your personal information, please contact the Corporate Officer at corporate.services@esquimalt.ca or 250-414-7135. More information can be found through our privacy policy, at Esquimalt.ca/municipal-services/communications/privacy-policy.

SIGNATURE: _____

DATE: _____

LIFE APPLICATION FORM 2026 FOR RESIDENTS OF THE TOWNSHIP OF ESQUIMALT

Who Is Eligible? Residents of the Township of Esquimalt whose gross income is within or below the estimated Low-Income Threshold (see front of this application form).

How Do I Apply?

1. Complete one application per family and drop off at reception at the Esquimalt Recreation Centre, 527 Fraser Street, Esquimalt BC, or call 250-412-8500 with any questions.
2. Provide current proof of residency such as a rental agreement or utility bill dated in the last three months.
3. Provide 2024 or 2025 Notice of Assessment as proof of individual/gross annual family income. A copy may be obtained through Revenue Canada at 1-800-959-8281 or <http://www.cra-arc.gc.ca/myaccount>.
4. Provide current, photo ID
5. LIFE Cards will be issued to each member of an eligible family and are valid for two calendar years based on date of application approval. **LIFE pass holders will be required to get a new 52 pass sticker each year.**
6. Newcomers to Canada do not require a NOA. Please provide official landing papers for each family member dated within the last 12 months.

CHOOSE ONE OF THE FOLLOWING DISCOUNTS

Option 1 Drop-in and Registration Discount (Valid for two years from date of application approval)

Receive all of the following discounts:

A. Unlimited drop-in admissions at Esquimalt Recreation AND 52 free drop-in admissions at any Greater Victoria Recreation Centre for use at West Shore, Saanich, City of Victoria, Oak Bay, Panorama, and SEAPARC.

- LIFE card must be presented at the time of admission.
- One card is issued once every two years for each family member.

*Each family member will be required to get a 52-admissions sticker added to their pass each year.

AND

B. Credit toward registered programs. Credit allotment is for the two-year term. Credit can be used toward registered programs with Esquimalt Parks and Recreation.

- \$80 per preschooler (0-5yrs)
- \$120 per child/youth (6-18yrs)
- \$80 per adult (19yrs+)

* Some restrictions apply.

Option 2 Annual Regional Pass Discount (Valid one year from date of purchase)

Receive the following discount:

A 50% reduction on a Regional Annual Pass

Receive this \$600.00 pass for \$300.00 (\$25.00/month, 12-month term)

- Unlimited access to drop-in programs at 14 Greater Victoria Recreation Centres (does not include YMCA-YWCA). Monthly payment plans available; Visa/MasterCard and automatic debit from your chequing account are accepted.

*Option 2 does not receive the Credit toward registered programs.

Other Information:

- LIFE passes are non-transferable and are not eligible for cash or credit.
- All eligible Esquimalt LIFE members (13 yrs+) may book a free Esquimalt weightroom orientation with reception.
- Participants must have their picture taken for their LIFE card.
- \$5 + tax replacement charge for lost cards.
- Replacement cards will be provided by subtracting 4 visits a month from January up to date card is replaced.

The LIFE (Leisure Involvement For Everyone) program is supported by the Greater Victoria Active Communities Committee.

FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED:

STAFF NAME:

