

REAL Program Application

REAL Vision

To provide opportunity for children and youth facing financial barriers to participate in recreation, music, dance, art, sports, leadership, and learning programs.

Application Deadlines (Applications are only valid for one season)

Summer: April 17

Fall: July 17

Winter/Spring: November 17

Guidelines to Apply:

1. Proof of residency (must be a St. John's resident) and proof of income (Notice of Assessment- Line 15000 preferred) are required to qualify for the REAL Program. Contact REAL Program for other acceptable statements of income.
2. Applications are accepted seasonally and are processed in accordance with deadline dates noted above. **Late applications will not be accepted.**
3. Children/youth can access one (1) activity each season (Fall, Winter/Spring, and Summer). Separate application for each child and each season required. Applications are not held over from one season to the next.
4. This is a service for children/youth NOT participating in paid or funded recreation programs.
5. Resources and placements are limited and often in demand. If a child is placed in an activity, attendance is required. If the child/youth cannot attend or participate, the parent/guardian must contact the REAL Program.
6. If transportation or equipment is required, contact must be made with the REAL Program as soon as possible.
7. If there are any days/times not suitable (that do not work) please include on the application.

Here's what to do:

1. Complete application **in full** identifying the activity of interest.
2. Parent/guardian must sign the authorization.
3. Attach proof of residency and proof of income.
4. Email, mail or drop off application.
5. If you require assistance please, call 709-576-8684/4556 or email real@stjohns.ca

Drop Off Location:

Administrative Office, 1 Crosbie Place
HGR Mews Community Centre, 40 Mundy Pond Road
Paul Reynolds Community Centre, 35 Carrick Drive
Access St. John's, 10 New Gower Street

Mailing Address:

City of St. John's, REAL Program
P.O Box 908
St. John's, NL A1C 5M2

ST. JOHN'S

NEWFOUNDLAND AND LABRADOR, CANADA

	CS – REAL Program Application	Community Services
	REAL Program Application	
Application Season and Deadline Dates (one program per child, per season)		SECTION 1
Deadline Dates: Select Season	April 17 Summer	July 17 Fall
		November 17 Winter/Spring
General Information		SECTION 2
First Name of Child _____ Last Name of Child _____ Gender: Male Female X Birth Date (YYYY-MM-DD) _____ School _____ Home Address _____ Apt # _____ St. John's, NL Postal Code _____ Parent/Guardian _____ Relationship to Child _____ Home Phone _____ Work/Cell phone _____ Email _____ Second Contact Name _____ Relationship _____ Phone _____ Has this child been placed in a program through the REAL Program in the past?: Yes No Will this child be registered in another paid/sponsored activity?: Yes No Do you own or have access to a vehicle?: Yes No Equipment Required?: Yes No _____ Additional information (Allergies, disabilities or behavioural issues) _____		
Program/Activity Preference		SECTION 3
Please list the type of program the participant is interested in (list days/times that are not suitable) <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">Choice #1 _____</div> <div style="text-align: center;">Choice #2 _____</div> <div style="text-align: center;">Choice #3 _____</div> </div> Days/times that are NOT suitable _____		

CS – REAL Program Application	Community Services																		
Household Occupants/Proof of Income	SECTION 4																		
<p>Please attach Canada Revenue Agency Notice of Assessment (NOA) for all adults living in your home. To obtain your most recent NOA call: 1-800-959-8281 or log into your account: https://www.canada.ca/en/revenue-agency.html</p> <p>Please list ALL persons in your household.</p> <p>Parent/Guardian Name _____ Income (if applicable) \$ _____</p> <p>Parent/Guardian Name _____ Income (if applicable) \$ _____</p> <p>Please list ALL child(ren) in your household below:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%; text-align: center;">Name of Child</th> <th style="width: 30%; text-align: center;">Birthdate</th> <th style="width: 35%; text-align: center;">School</th> </tr> </thead> <tbody> <tr><td>1. _____</td><td>_____</td><td>_____</td></tr> <tr><td>2. _____</td><td>_____</td><td>_____</td></tr> <tr><td>3. _____</td><td>_____</td><td>_____</td></tr> <tr><td>4. _____</td><td>_____</td><td>_____</td></tr> <tr><td>5. _____</td><td>_____</td><td>_____</td></tr> </tbody> </table>		Name of Child	Birthdate	School	1. _____	_____	_____	2. _____	_____	_____	3. _____	_____	_____	4. _____	_____	_____	5. _____	_____	_____
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1. _____	_____	_____																	
2. _____	_____	_____																	
3. _____	_____	_____																	
4. _____	_____	_____																	
5. _____	_____	_____																	
Parent/Guardian Authorization (REQUIRED)	SECTION 5																		
<p>I authorize the REAL Program to collect and release the necessary information (excluding financial information) for administrative purposes. My signature also verifies that financial assistance is required from the REAL Program for my child to participate. I assume full responsibility for the supervision of my child while in the program.</p> <p>Signature _____ Date _____</p>																			
Privacy Notice	SECTION 6																		
<p>Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process this application. Questions about the collection and use of the information may be directed to Manager of Healthy City and Inclusion at real@stjohns.ca.</p>																			
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Please send completed form to:</td> <td style="width: 33%;">City of St. John's - REAL Program P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2</td> <td style="width: 33%;">For further information: Phone: 709-576-8684/4556 Email: real@stjohns.ca</td> </tr> </table>		Please send completed form to:	City of St. John's - REAL Program P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2	For further information: Phone: 709-576-8684/4556 Email: real@stjohns.ca															
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