

HEAR THAT?

Leisure Inclusion for Everyone

IT'S GETTING LOUDER...

Leisure Inclusion for Everyone

WHAT IS THAT?

Leisure Inclusion for Everyone

A RALLY CRY. AN IDEOLOGY.

Leisure Inclusion for Everyone

A VALUE...



Leisure Inclusion for Everyone

THAT'S Recclife.

We embrace the concept that everyone has the right to live well and prosper. We take that philosophy and apply it to what Rath Eastlink Community Centre provides to the community: access to fitness and recreation opportunities in a safe, best-practice, state-of-the-art facility. Then Recclife, through reductions on memberships, provides facility access to local families, youth, and individuals facing financial barriers.

How does it work?

Approved applicants will receive a 3 month membership at reduced cost. Memberships will include access to Fitness Centre and group exercise classes, Aquatic Centre and classes, Rock Climbing Wall, Ice Pad for skating, and child minding services during scheduled hours of operation. A quick and easy assessment process determines the cost of each 3 - month membership, based on individual circumstances. Though this fee must be paid in full at the time of registration, it will be at a reduced rate. At the end of 3 months we review your experience, usage, and current needs to assess continuation in the program. Strict confidentiality is maintained during all stages of program involvement.

HOW DO I APPLY? HOW DO I GET STARTED?

IT'S SIMPLE.

1. Complete and submit the enclosed application form
2. Wait for us to contact you (we may request more info)
3. Upon approval, visit our Welcome Desk to pay your balance owing and complete the necessary forms
4. Complete an orientation with an experienced fitness centre staff member... and then start exercising!

RATH EASTLINK COMMUNITY CENTRE
625 Abenaki Rd . Truro NS . B2N 0G6
902.893.2224
recclife @ratheastlinkcc.ca



ratheastlinkcommunitycentre.ca

FOR OFFICE
USE ONLY

DATE

REFERENCE CONTACTED?

Yes

No

REFERENCE APPROVED?

Yes

No

REASON IF DECLINED

TOTAL AMOUNT OF PROGRAM

BALANCE TO BE PAID BY APPLICANT

PAYMENT CONFIRMATION - TO BE COMPLETED BY
WELCOME DESK STAFF MEMBER UPON PAYMENT

AMOUNT PAID

BALANCE TO BE PAID BY Recclife

WD STAFF MEMBER NAME

WD STAFF SIGNATURE

PAYMENT AGREEMENT NOTES

REVIEWED BY

AUTHORIZED BY

DATE

Revised - Nov 4, 2021



LEISURE INCLUSION FOR EVERYONE

RATH EASTLINK COMMUNITY CENTRE
Recclife
APPLICATION



FULL NAME (First & Last)		BIRTHDATE (dd/mm/yy)	
HOME ADDRESS		CITY or TOWN	POSTAL CODE
DAY-TIME PHONE	EVENING PHONE	EMAIL	
NAME OF PARENT OR GUARDIAN (For children/youth under 16yrs)			

APPLICATION
PLEASE COMPLETE ALL SECTIONS

<input type="text"/>	<input type="text"/>
MEMBERSHIP TYPE YOU'RE REQUESTING	AMOUNT YOU BELIEVE YOU CAN AFFORD FOR YOUR ReccLIFE MEMBERSHIP

REFERENCE & RELEASE

It is mandatory to attach a document that can validate your financial information (T4, paystub etc.) Please check that you have included this documentation.

It is mandatory to attach a formal letter of reference from one of the following individuals who would be intimately familiar with your financial situation and your need for assistance through the ReccLIFE program. Submission of a reference letter MUST come from one of the following community leaders. Please circle selected reference:

<input type="checkbox"/> Clergy	<input type="checkbox"/> Medical Doctor
<input type="checkbox"/> Social Worker	<input type="checkbox"/> Coach
<input type="checkbox"/> Teacher	<input type="checkbox"/> Therapist

Please check that you have included a reference letter.

Please briefly explain why you would benefit from support through the ReccLIFE program:

EXPLANATION
TELL US ABOUT YOUR SITUATION

CHOOSE ONE OF OUR 3 - MONTH REGULAR MEMBERSHIP OPTIONS (FEES SHOWN ARE TAXES-IN)

ADULT	\$182.67
STUDENT	\$120.57
CLUB 60	\$120.57
ADULT + ONE	\$299.98
STUDENT and/or CLUB 60 + ONE	\$227.52
FAMILY	\$344.82

IDENTIFY THE GROSS ANNUAL INCOME FOR YOUR HOUSE...

0 - \$31,000
\$31,001 - \$38,000
\$38,001 - \$46,000
\$46,001 - \$52,000
\$52,001 - \$59,000
\$59,001 - \$66,000

... THEN THE NUMBER OF PEOPLE IN YOUR HOME, TO DETERMINE A PERCENTAGE OWED

1-2	3	4	5	6
50%	40%	30%	20%	10%
60%	50%	40%	30%	20%
70%	60%	50%	40%	30%
80%	70%	60%	50%	40%
90%	80%	70%	60%	50%
full	90%	80%	70%	60%

COST DETERMINATION
POTENTIAL COST OF YOUR 3 - MONTH MEMBERSHIP

$$\begin{matrix}
 \$ \\
 \text{REGULAR COST OF MEMBERSHIP OPTION}
 \end{matrix}
 \times
 \begin{matrix}
 \% \\
 \text{PERCENTAGE OWED}
 \end{matrix}
 =
 \begin{matrix}
 \$ \\
 \text{FEE FOR YOUR ReccLIFE MEMBERSHIP}
 \end{matrix}$$

If you have circumstances that impact your financial situation, that cannot be understood solely based on your annual household income (expensive medications, extensive therapy required, etc.), but prevent you from being able to afford the calculated price of your ReccLIFE membership above, please tell us about it. We will consider these factors when reviewing your application and do our very best to accommodate your specific needs.

DISCRETION
IS THERE ANYTHING ELSE?

NAME OF REFERENCE	
OCCUPATION	# OF YEARS KNOWN
DAY-TIME PHONE	EVENING PHONE

SIGNATURE OF REFERENCE IS MANDATORY AND INDICATES PERMISSION FOR RATH EASTLINK COMMUNITY CENTRE TO MAKE CONTACT TO CONFIRM DETAILS AND RELATIONSHIP:

REFERENCE SIGNATURE	DATE
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APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

authorizes the above reference to release my personal information, as required for program placement. I further authorize the Rath Eastlink Community Centre to collect this information. My signature also verifies that all info in this application is true and that I will notify the RECC immediately if my financial circumstances change during the course of my sponsorship through ReccLIFE.