

ADMINISTRATION POLICY

NAME: Recreation Fee Assistance Program (RFAP) Policy	POLICY NUMBER: CDSP-A-01
DEPARTMENT: Community Development and Social Planning	SUPERSEDES: C-07-21
DATE APPROVED: July 10, 2023	REVISION DATE:

1. POLICY STATEMENT

The Town of Drumheller believes that well-being and quality of life of its residents are important. Upon approval of an application process, the program allows eligible residents access into the following recreation facilities at a reduced (subsidized) rate: Arena (via multi-facility pass), Aquaplex and Badlands Community Facility. It also offers a credit that patrons can use towards registered classes and programs.

The budget allocation for the Recreation Fee Assistance Program is determined by Council on an annual basis, as part of the Operating Budget approval process.

2. DEFINITIONS

- a. **“Eligible Residents”** must be resident within the municipal boundaries of Drumheller, must declare that they are eligible to access/receive municipal benefits/funds, and must meet Total Household Income thresholds.
- b. **“Proof of Eligibility”** is provided by evidencing Proof of Residency, confirming Citizenship/Residency status (and eligibility to access/receive municipal funds) and evidencing Proof of Total Household Income.
- c. **“Proof of Residency Documents”** are any of the following:
 - i. Driver’s License
 - ii. Financial Information (e.g. Notification of Assessment or Utility bill stating name/address)
 - iii. Lease agreement
 - iv. Letter from Grace House
- d. **“Citizenship/Residency Status”** applicants must identify their citizenship/residency status and declare that they are eligible to receive municipal benefits/funds on the application form.
- e. **“Total Household Income”** is defined as total income from household members that are combined for the purpose of calculating income-tested benefits such as GST/HST credit or Canada Child Benefit, and/or income from **all household members that are claimed as dependents on your tax return**. Examples *may* include:
 - i. A married or common law couple with or without dependents.

- li. Up to two cohabiting adults with or without dependents (cohabiting is 'the state of living together and having an intimate partner relationship without being married').
- iii. A lone parent with dependents.
- iv. Guardian(s) and the dependents in their care.
- vi. Intergenerational families with or without dependents.

An applicant would not need to include the income of an adult that shares the residence, but that is financially independent of the applicant. For example, someone to whom the applicant sub-lets a room in their house.

Any regular Household income that is excluded as income for tax purposes should be declared but will also be excluded from the calculation of Total Household Income. E.g. Canada child benefit.

f. **"Proof of Total Household Income"**

The preferred Proof of Total Household Income is a Notice of Assessment showing line 236 (net income) issued by Canada Revenue Agency for all Household members as defined by 2.5. Where this is not available, the following proofs will be accepted:

- i. AISH Health Benefits Card or other provincial government issued document showing the applicant is currently receiving AISH. This must show the name of the applicant.
- ii. Government documentation showing the applicant is currently receiving provincial income support e.g. *Alberta Works, Alberta Seniors Benefit*.
- iii. Two Pay stubs dated in the past 2 months. *This must include hourly rate, number of hours worked per week and any bonuses.*
- iv. If none of the above are available, the applicant may discuss alternatives with the CDSP team.

g. **"Approved Period"** means the period that the RFAP subsidy is approved for. Typically, this will be for the remainder of the current calendar year, with an end date of December 31, 2023. However, discretion will be applied, for example, the Approved Period for residents of Grace House will be based on the letter provided by Grace House. Where an Approved Period is less than 12 months, the credit may also be prorated.

- i. Approved clients must initiate their approved membership subsidy within 60 days of approval. Where clients do not meet this deadline (without prior approval), their approval will be withdrawn. Such clients will be eligible to reapply should they choose to.

3. PROGRAM DETAILS - APPLICATIONS

3.1. The application for Recreation Fee Assistance is now included on a combined "DrumLIFE Pass" application form. The DrumLIFE Pass is a one-stop application for all the subsidy programs offered by the Town of Drumheller and other participating businesses/organizations.

- a. Applications are accepted throughout the year and can be submitted online on the Town's website. Alternatively, paper copies are available at Town Hall, the Badlands Community Facility and the Aquaplex.

- b. The RFAP subsidy program is available to eligible residents of the Drumheller Valley upon submission of a completed application form, including Proof of Residency and Proof of Total Household income. Applicant and Household information is required for all applications.
- c. Eligibility criteria are based on the qualifications as outlined in the attached "Schedule A".
- d. Applications that do not reflect an income or with exceptional circumstances will be reviewed using an interview process. Administration will use this interview to better understand the client's circumstances and support them to provide evidence for their application. Discretion may be required on a case-by-case basis.
- e. All applications will be reviewed and approved by the Manager of Community Development and Social Planning, or their delegate.
- f. Under normal circumstances, applicants will be notified of the outcome within 5 working days of complete application submission. There are occasions when this service standard may be extended.

4. REQUIREMENTS

- a. RFAP subsidies may be applied only to regular memberships of the BCF, Aquaplex or multi-facility memberships. An RFAP subsidy cannot be applied to single entrance fees or to 10-pass purchases.
- b. Where an applicant is eligible for a corporate discount and RFAP subsidy, they must choose which one to apply to their membership. It is not possible to apply both.
- c. Full Fee Assistance will total 90% subsidy on the selected facility membership fee for the current calendar year and will include a \$200.00 credit towards registered programs.
- d. Partial Fee Assistance will total 50% subsidy on the facility membership fee for the current calendar year and will include a \$100.00 credit towards registered programs:
 - i. The credit value is applied per household, regardless of composition.
 - ii. The credit value may be prorated for those awarded a shorter Approved Period e.g. Grace House residents.
- e. Successful applicants will pay their portion (10% or 50%) of the total facility membership fees on a monthly, continuous, basis for the Approved Period. Successful applicants will also pay any remaining costs for registered programs after the credit is applied.

- f. RFAP clients will be required to place a credit card on file for automatic payment of their portion of the fees on a continuous basis. Alternatively, payment can be made by direct debit. Direct debit payments will require: the applicant's financial institution number, branch transit number and account type. The auto renewal payment will be charged at the beginning of the applicant's billing cycle.
- g. As standard, a \$20.00 Activation Fee is payable when a recreation membership is first activated or reactivated after being stopped. The cost of this Activation Fee for approved RFAP clients will be subsidized at 90% or 50%, in line with approved fee assistance level. The subsidized portion (50% or 90%) will be waived and not be charged to the RFAP budget. The client portion (10% or 50%) will be payable at the time membership is activated.
- h. Approved applicants will be contacted by phone or email within one month of the end date of the Approved period, to remind them to reapply. If a new application is not received and approved, eligibility for RFAP will cease and the client's liability for membership fees payment will revert to 100%, unless they cancel their membership. Cancelling membership remains the responsibility of the applicant.
- i. Audits will be completed on subsidized memberships to determine the frequency of use of the membership. The purpose of this is to ensure that memberships are being utilized by RFAP recipients and that funds are being allocated effectively to achieve Council's objective of maximizing resident's ability to participate in recreational activities at Town facilities. Memberships that have been used less than once a month during the term may not be renewed.

4. ATTACHMENTS

- a. Schedule A – Qualification for Recreation Fee Assistance Program
- b. Drum Life Pass Application

5. TRANSITIONAL

- a. This Policy repeals Policy C-07-21 upon approval from Council.
- b. This Policy comes into effect on the date of signing.



CHIEF ADMINISTRATIVE OFFICER

REVISIONS C-01-16

SCHEDULE A

QUALIFICATION FOR RECREATION FEE ASSISTANCE PROGRAM

1. AUTOMATIC INCOME QUALIFICATION

Qualification is automatic at 90% subsidy if you are a current resident of the Town of Drumheller and one of the following applies to you:

- a. You are in receipt of a means tested benefit such as Income Support or another Alberta Supports program (e.g. AB Seniors Benefit, Child Benefit):
 - i. Please provide a copy of your government issued approval letter stating the expiry date, or your Adult/Child Benefit Card or direct deposit statement.
- b. You are in receipt of AISH (Assured Income for the Severely Handicapped), **and** you live alone:
 - i. Please include a copy of your AISH Health Benefits Card or other provincial government issued document showing the applicant is currently receiving AISH. This must show the name of the applicant.
- c. You are a Drumheller Housing Administration Tenant:
 - i. Please provide a copy of your tenancy agreement or your most recent receipt.
- d. You are in receipt of the Rent Subsidy Program through Drumheller Housing Administration:
 - i. Please provide a copy of your approval letter from DHA stating expiry date.
- e. You are on Guaranteed Income Supplement:
 - i. Please provide a copy of your Guaranteed Income approval letter or direct deposit statement.
- f. You have Refugee Status:
 - i. Please provide a copy of your Protected Person Status document. For Refugee Claimants, provide a copy of your Refugee Protection Claimant document.
- g. You are a resident of Grace House:
 - i. Please provide a letter from Grace House confirming your participation in their residential program. This letter should include the duration of your program, to inform the Approved period.

2. CONDITIONAL INCOME QUALIFICATION:

Residents of the Town of Drumheller may also qualify for RFAP subsidy program where one of the following applies:

- a. Where an AISH recipient is a member of a larger household (per 2.5), the total household income will determine eligibility:
 - i. Please include a copy of your AISH Health Benefits Card or other provincial government issued document showing the applicant is currently receiving AISH as part of the evidence of Total Household Income (Per 2.5 and 2.6). This must show the name of the applicant.
- b. Applicants with a Total Household Income that meets the thresholds outlined below (Total Household Income Threshold Categories):
 - i. Any regular Household income that is excluded as income for tax purposes should be declared but will also be excluded from the calculation of Total Household Income. E.g. Canada Child benefit.
 - ii. The preferred proof of income is a copy of the Notification of Assessment for eligible household members (see 2.6).

Total Household Income Threshold Categories

	Full Benefits (90% membership subsidy + \$200 programming credit)	Partial Benefits (50% membership subsidy + \$100 credit)
Single Person	up to \$38,500	up to \$44,000
Household with 2+ people	up to \$51,000	up to \$63,000

Those who do not have documentation will be contacted and the application process will include an interview.

Drum Life Pass

Please complete this application and return to the Town Hall between 8:00 a.m. and 4:30 p.m. at 224 Center Street, Drumheller, AB T0J 0Y4. Alternatively, you can apply online at: [Affordability & Assistance: Town of Drumheller](https://www.drumheller.ca/live/community-programs-events/affordability-assistance) - <https://www.drumheller.ca/live/community-programs-events/affordability-assistance>. If you have any questions or concerns filling out this form, please contact the Community & Corporate Services Administrative Assistant at: 403.823.1324 or CDSP@Drumheller.ca.

Program runs on the Calendar Year (January – December). You must reapply each year for this program. Applications for the next calendar year will be available in December each year.

A. Proof of Eligibility Recipients of the Drum Life Pass must be:

- residents of Drumheller – Starland County for subsidized counselling program.
- be eligible to receive municipal funds.
- and have an annual income below the income threshold.

Proof of residency can be provided by (minimum of one):

- | | |
|---|--|
| <input type="checkbox"/> Driver's license | <input type="checkbox"/> Financial information (copy of bill with your name/address) |
| <input type="checkbox"/> Lease agreement | <input type="checkbox"/> Letter from Grace House |

Citizenship/Residency Status (select one):

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Canadian Citizen | <input type="checkbox"/> Permanent Resident | <input type="checkbox"/> Other _____ |
|---|---|--------------------------------------|

Household (select all that apply):

- | | | |
|---------------------------------|---|--|
| <input type="checkbox"/> Single | <input type="checkbox"/> Married/Common Law | <input type="checkbox"/> with children |
|---------------------------------|---|--|

Proof of income must be provided for all adult household members. Preferred sources being:

- ☐ Notice of Assessment showing line 236 net income, issued by Canada Revenue Agency
- ☐ Government documentation showing eligibility for income tested benefits (*Income Support, Alberta Seniors Benefit, Guaranteed Income Supplement, Child Benefit, AISH*)
- ☐ Evidence that you are a Drumheller Housing Authority tenant or that you are in receipt of the Rent Subsidy Program (*DHA Tenancy agreement or Rent subsidy approval letter showing your name/address*)

B. Applicant must be aged 18+ (Please print)

First Name: _____ Last Name: _____

Address: _____ Date of Birth: _____

City: _____ Province _____ Postal Code: _____

Email: _____ Phone #: _____

C. Additional Family Information (Please list all Household members included in this application.)

Name	Relationship	Date of Birth (MM/DD/YYYY)

D. I would like to apply for the following programs (select all that apply):

- ☐ Recreation Fee Assistance Program
 ☐ Hot Meals (55+)
 ☐ Counselling Subsidy
 ☐ Home Support (55+)
 ☐ Volunteer Tax Program
 ☐ Older Adult Program subsidy (55+)
 ☐ Youth Program subsidy (grades 7-12)

E. If approved, select which form of Recreational Facility membership you would like your discount applied to:

	Single Facility (Aquaplex OR Badlands Community Facility)	Multi Facility (Aquaplex, Memorial Arena AND Badlands Community Facility)
Youth (6-17)	<input type="checkbox"/> \$ 28.75*	<input type="checkbox"/> \$40.00*
Adult (18-59)	<input type="checkbox"/> \$ 44.00*	<input type="checkbox"/> \$56.50*
Family	<input type="checkbox"/> \$ 82.00*	<input type="checkbox"/> \$102.50*
Senior (60+)	<input type="checkbox"/> \$ 28.75*	<input type="checkbox"/> \$40.00*

*This the regular monthly cost and does not account for 50% or 90% subsidy based on application approval.

F. Net Total Household Income (add up your line 236s)

Adult Household Members (Name)	Government Benefits (AISH, Income Support, AB Seniors Benefit)	Income (line 236 of Notice of Assessment)
	TOTAL	

☐ I would like to receive e-mails regarding the available programs with The Town of Drumheller

G. Signature - In signing I guarantee the above information provided is complete and true to the best of my knowledge AND that I am eligible to receive municipal funds.

Applicant Signature: _____ Date: _____

Administration Use

Supporting documents reviewed: ☐ Yes ☐ No Date: _____ Initials: _____

Application approved: ☐ 90% ☐ 50% ☐ Not approved Date: _____

Counselling approved: ☐ 90% ☐ 50% ☐ Not approved Date: _____

Reason for Not Approved: _____

Which programs approved?

- ☐ Recreation Fee Assistance Program
 ☐ Volunteer Tax Program
 ☐ Youth Program Subsidy
 ☐ Counselling Subsidy
 ☐ Home Support (55+)
 ☐ Older Adult Program Subsidy (55+)
 ☐ Hot Meals (55+)

Recreation Fee Assistance Income Thresholds (2023)			Community Counselling Assistance Income Thresholds (2022)			
	Full Benefits (90% & \$200.00 credit)	Partial Benefits (50% & \$100.00 credit)		Full Benefits (90% discount)	Partial Benefit (50% discount)	Ineligible (as income too high)
Single Income	up to \$27,000	up to \$31,500	Single person	Up to \$35,000	\$35,001-\$70,000	\$70,001+
Dual Income	up to \$48,500	up to \$63,000	Family (2+ people)	Up to \$60,000	\$60,001-\$90,000	\$90,001+

Signature: _____ Renewal date: _____ Date client advised of approval: _____