

Loughborough Christmas and Emergency Relief Committee

Thank you for reaching out to us for assistance. Please complete the form below to help us understand your needs. All information provided will remain confidential and used solely for determining assistance eligibility.

Applicant Information

Full Name:

Address:

City:

_____ **Province:** _____ **Postal Code:** _____

Phone Number:

Email Address:

Preferred Contact Method (Phone/Email):

Household Information

Number of Adults in Household:

Number of Children in Household (Include Ages):

Financial Assistance Request Details

Please indicate the type of assistance you are requesting:

- Christmas
- Utility assistance (e.g., heating, electricity)
- Other (please specify): _____

Briefly describe your current financial situation and the reason for your request:

Additional Information

Are you currently receiving assistance from any other organizations?

- Yes (Please list): _____
- No

Are there any special needs or considerations we should be aware of?

Verification and Signature

I certify that the information provided in this form is true and accurate to the best of my knowledge. I understand that providing false information may result in the denial of assistance.

Signature: _____

Date: _____

Please submit the completed form to:

Loughborough Christmas and Emergency Relief Committee

Box 88, Sydenham, Ontario K0H 2T0

Email: Sue Hitchcock, Secretary hitchcocksusan1965@gmail.com

Questions: Chair, Linda Bates 613-374-1307 (between 8 am – 7 pm weekdays only)