



Financial Assistance Form

For youth ceramics and adult fine arts classes for those who were impacted by the
October 2017 North Bay firestorm

Name: _____ Date: _____

Name of class: _____ Class #: _____ Class fee: _____

Seeking assistance for: Self Child

If for a child, name and age of child: _____

Address: _____ City: _____ Zip: _____

Home phone: _____ Cell phone: _____ Email: _____

Were you affected in by the October Firestorms? You may be eligible for a 75% discount on certain classes offered by the Center. Indicate your experience below:

Number of persons living in household: _____

Total annual income is: Under \$25,000 \$25,000 - \$50,000 Above \$50,000

If under 18 years of age, please have your parent complete the following (please print):

Parent / Guardian name: _____

Student's school: _____

Parent / Guardian's signature: _____