



	CONTACT INFORI	MATION – Primary Applicar	nt	
To be eligible for Access for All, you must be a resident of Yellowknife.				
First Name		Last Name		
Residential Address (PO Boxes will NOT be accepted)		Email		
Postal Code		Phone Number		
Date of Birth (MM/DD/YYYY)		Alternate Phone Number		
HOUSEHOLD INFORMATION – Additional Members				
First Name	Last Name	Relationship to Applicant	Date of Birth (MM/DD/YYYY)	Transit Type (REG / YATS)
 				
INCOME VERIFICATION				
Please provide ONE of the following for every member of your household over the age of 18:				
Income Assistance Financial Case Report from the GNWT Department of Education, Culture and Employment				
Current Canada Revenue Agency Notice of Assessment (Line 15000)				
To access your Notice of Assessment online, visit https://www.canada.ca/en/revenue-agency.html				
CONSENT				
I, declare that: (Applicant Name, Please Print)				
 I am a resident of Yellowknife, NT. I am the main applicant and it is my responsibility to inform all members of my household about the Access for All conditions of use. 				
 I give the City of Yellowknife permission to verify the information within this application. The personal information collected by this form will only be used for operating the Access for All program. The City of Yellowknife may contact me for matters pertaining to this application. 				
 The information I have provided is true. Misuse of Access for All privileges or misinformation provided on this application will result in privileges being revoked. 				
Signature: Date:				

The City of Yellowknife can only process application forms that are completed with all the supporting documentation included. If you have any questions or need assistance filling out this form, please call 920-5686. Email applications to AccessForAll@yellowknife.ca. For further information, visit www.yellowknife.ca/en/living-here/Access-for-All.asp.