

Eligibility	Eligibility is based on the following criteria: Residency: be a Resident of Maple Ridge; (not applicable to persons with a study, and/or visitor visa); and Diagnosed: be diagnosed with a temporary and/or permanent Disability(ies) with required documentation <i>Please note: this service is only available for the individual diagnosed with a disability, and not the family unit; one applicant per application.</i>
Complete Application	If you meet the eligibility requirements: - Complete the application form (Section 1, 2, and 3a—if applicable) - Attach proof of Maple Ridge Residency - Attach Official Government Documentation pertaining to the disability (or) - Completed Adjudicator or Agency signature (Section 3b) of Application
Submit Application	Submit your application, proof of residency and documentation: - Online: https://www.mapleridge.ca/financial-access - Email: accesspass@mapleridge.ca - In Person: Maple Ridge Leisure Centre, 11925 Haney Pl, Maple Ridge BC, V2X 6G2 Albion Community Centre, 24165 104th Ave, Maple Ridge BC, V2W 1J2
Approval	Applications are reviewed within ten (10) business days of submission. - Primary applicants will be notified via email or phone call Once approved you will receive: 50% off admissions (Drop in, 10-pass, 20-pass, 1-month or 3-month passes) 25% off program fees to a maximum spending of \$150 annually (Some restrictions may apply) <i>Access Pass (Persons with Disability) is valid for one year from date of approval. Applicants can re-apply annually if they continue to meet the eligibility criteria as outlined above.</i>



11995 Haney Place, Maple Ridge, BC V2X 6A9
Phone: 604-467-7322 Email: AccessPass@MapleRidge.ca

Access Pass Application Persons with Disability(ies)

Providing equitable recreation opportunities to
support a healthy and engaged community.

Please complete the following application and ensure your Maple Ridge residency and verification documentation is included. For more detailed information on the *Access Pass (Persons with Disability(ies))*, please refer to the Access Pass (Persons with Disability(ies)) information found at <https://www.mapleridge.ca/financial-access>.

Section 1: Applicant Information

Last Name: _____ **First Name:** _____
Address: _____ City: _____ Postal Code: _____
Phone: _____ Email: _____
Birthdate (YYYY-MM-DD): _____
First Time Applying for *Access Pass (Persons with Disability(ies))*? ☐ Yes ☐ No

Section 2: Guardian or Caregiver Information (If Applicable)

Last Name: _____ **First Name:** _____
Address: _____ City: _____ Postal Code: _____
Phone: _____ Email: _____
Birthdate (YYYY-MM-DD): _____

Section 3a: Verification

I confirm that all the information provided is current.

Applicant (Guardian or Caregiver, If Applicant Under 19): _____
Signature Date



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Section 3b: Adjudicator/Agency Details

Adjudicator/ Agency Verification:

The Applicant Meets the Criteria to Receive Access Pass: ☐

Organization Name: _____

Phone: _____ Email: _____

Adjudicator/Agency Staff Representative:

Last/First Name: _____ Title/Position: _____

Signature: _____

Personal information entered on this form is collected under the authority of section 26© of the freedom of Information and Protection of Privacy Act (FIPPA) for the purpose of Access Pass (Persons with Disability(ies) Application. If you have any questions or concerns about how your information will be used, contact the Legislative Services Department by calling 604-466-4300 ext. 5557 or by emailing FOI@MapleRidge.ca. For more information about FIPPA at the city, please visit our [Freedom of Information](#) page.

Office Use Only

Date Received: _____ Reviewed By: _____

Item	Yes	No	Comments
Application Approved	☐	☐	
Xplor Recreation Updated	☐	☐	
Applicant Contacted	☐	☐	
Declined	☐	☐	

Date Completed: _____ Documents Filed: ☐ Yes ☐ No

Income Documents Destroyed: ☐ Yes ☐ No