



HEBREW FREE LOAN MARCH OF THE LIVING INTEREST FREE LOAN 2019 FORM



Please note that all questions on this form must be completed

FAMILY INFORMATION

FAMILY NAME (OF CHILDREN ONLY):

EMAIL:

HOME PHONE:

CELL PHONE:

PARENT 1

FIRST NAME:

LAST NAME:

DATE OF BIRTH:

PARENT 2

FIRST NAME:

LAST NAME:

DATE OF BIRTH:

FAMILY ADDRESS:

CITY:

POSTAL CODE:

MARITAL STATUS: MARRIED DIVORCED SEPARATED COMMON LAW OTHER

IF OTHER, PLEASE INDICATE:

CHILDREN LIVING WITH: BOTH PARENTS SINGLE PARENT OTHER

IF OTHER, PLEASE INDICATE:

CHILD 1

FIRST NAME:

DATE OF BIRTH:

DID YOU APPLY FOR MOL 2019 FOR THIS CHILD? YES NO

IS HE/SHE A GENERATIONS FUND CAPS OR CAMPS GRANTS RECIPIENT? YES NO

SCHOOL NAME: SCHOOL GRADE:

CHILD 2

FIRST NAME:

DATE OF BIRTH:

DID YOU APPLY FOR MOL 2019 FOR THIS CHILD? YES NO

IS HE/SHE A GENERATIONS FUND CAPS OR CAMPS GRANTS RECIPIENT? YES NO

SCHOOL NAME: SCHOOL GRADE:

FINANCIAL INFORMATION

WHAT IS YOUR COMBINED TOTAL GROSS INCOME, AS REFLECTED ON LINE 199 OF YOUR 2017 REVENU QUEBEC NOTICE OF ASSESSMENT?

PARENT 1:**PARENT 2:**

Are you a shareholder in a privately held company? YES NO

A privately held company is an organization that is controlled by you or your spouse or is controlled by someone related to you or your spouse by blood (parents, grandparents, siblings, children)

IF YOU ANSWERED YES TO THE QUESTION ABOVE:

How much income (benefits or actual income) do you receive from that company in addition to the income on line 199 of your personal Revenu Quebec Notice of Assessment?

TOTAL REVENUE (PARENT 1 + PARENT 2 + COMPANY INCOME(IF ANY ENTERED)) :**PARENTS' DECLARATION**

I/we declare that the information provided on this form is, to the best of my/our knowledge, complete, correct and true. I/we give permission to the Generations Fund to verify the information reported herein. Any incomplete or inaccurate information may result in the review or the withdrawal, in part or in whole, of the March of the Living Interest Free Loan. I/we acknowledge that, in such a case, I/we are obliged to satisfy any revised payment terms or to withdraw my/our child(ren) from the March of the Living. Also note that the Generations Fund reserves the right to share any financial or personal information provided with March of the Living and Hebrew Free Loan Association in order to ensure program integrity. This application forms part of the contract between me/us, the Generations Fund and Hebrew Free Loan.

PARENT/GUARDIAN 1 AGREES: YES NO

PARENT/GUARDIAN 2 AGREES: YES NO

FILL OUT AND SUBMIT THE PDF MARCH OF THE LIVING INTEREST FREE LOAN 2019 AND YOUR 2017 QUEBEC NOTICE OF ASSESSMENT FOR BOTH PARENTS.
 ALL DOCUMENTS MUST BE SUBMITTED TO info@generationsfund.ca. PLEASE NOTE YOU MAY SUBMIT ONE LOAN APPLICATION PER FAMILY.