



## APPLICATION FORM

### CLOTH DIAPERS FOR BABIES / GRANT PROGRAM

Name: \_\_\_\_\_ First name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (other): \_\_\_\_\_

Email: \_\_\_\_\_

#### ELIGIBILITY CONDITIONS

- Be a Town of Pincourt resident;
- Be a parent of a child under the age of one (1) at the time the application is submitted;
- Buy new cloth diapers or rent cloth diapers from a cloth diaper rental service.

#### SUPPORTING DOCUMENTS TO INCLUDE WITH THE APPLICATION

- Original invoice for the purchase or rental of new cloth diapers for the 12-months period from January 1 to December 31, of this year;
- Copy of the child's birth certificate;
- Proof of residence.

#### Submit the application form and supporting documents to:

Town Hall Town of Pincourt  
919, chemin Duhamel, Pincourt (Québec) J7W 4G8

Or by email at

[c.masse@villepincourt.qc.ca](mailto:c.masse@villepincourt.qc.ca)

#### COMMITMENT

I, \_\_\_\_\_ (in block letters), agree to abide by the terms and conditions of the grant program related to this application. I authorize the Town to visit the premises to verify the accuracy of the application. I certify that the requested grant is for a residence located in the Town of Pincourt.

Signature : \_\_\_\_\_ Date : \_\_\_\_\_