

AHG Wildfire Relief Program Application Form

Name of Applicant:

AHG Team:

Address:

City/Province:

Phone Number:

Email Address:

Losses and Impact:

- Describe the extent of the losses suffered due to the wildfire (e.g., property damage, home loss, personal belongings):

- Provide any documentation or evidence of the wildfire impact (e.g., photographs, insurance claims, official reports):

Financial Situation:

- Describe your current financial situation and any hardships you are facing as a result of the wildfire:

- Are you currently receiving any other forms of financial assistance or support related to the wildfire? If yes, please provide details:

- If applicable, please specify the value and details of the hockey gear lost due to the wildfire:

Additional Information:

- Are there any other circumstances or information you would like us to consider when evaluating your application?

Declaration: I declare that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false or misleading information may result in the rejection of my application.

Applicant's Signature: _____ Date: _____