



VOUCHER APPLICATION

Canton Café Free Meal Voucher
(Dine In Only)

Senior Center Fitness Voucher

HOUSEHOLD DEMOGRAPHICS

Name: _____

Address _____ Town _____ Zip _____

Email Address: _____ Phone#: _____

Employment: Part Time _____ Full Time _____ Unemployed _____ Retired: _____

Household Income: _____

ELIGIBILITY REQUIREMENTS

1. **Total Gross Income.** Income must not exceed \$30,120 if single and \$40,884 if married.
2. **Proof of Canton residency.** Applicants must provide a recent piece of official mail with their current Canton address.
3. **Proof of Income.** Applicants must provide proof of income.

Note: Supporting documentation will not be returned. Information is verified by Senior & Social Services Director or designee. All information remains confidential in the Senior & Social Services Department.

- *I understand the policy of Senior & Social Services and affirm that all the information given on this form is true to the best of my knowledge*

Signature: _____ **Date:** _____

Vouchers funded by Canton Community Health Fund. Vouchers available for Canton residents until funds are depleted.