

## Community Hair Fund Application Form

### Applicant Information:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### Eligibility Criteria:

1. Are you a resident of Lake Country?

Yes

No

2. Age:

Under 18 (Parental consent required)

18 or older

Documentation: We will require proof of ID at your appointment

Please attach the following documents with your application:

Personal statement (up to 300 words) explaining your need for assistance.

### Submission:

Please submit your completed application form and supporting documents to:

BB Hair Studio

102A 3121 Hill Road

Lake Country BC V4V 1G1

Consent:

By signing below, you confirm that the information provided in this application is accurate to the best of your knowledge and that you agree to the terms of the Community Hair Fund.

Signature:

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Date:

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Thank you for your interest in the Community Hair Fund. This initiative is only available to lake county residents. Your application will be reviewed, in the next 3-6 weeks. If you require services sooner please specify in your personal message the reason for the urgency. If you have any questions, please contact us at BB Hair Studio. We will only contact the approved applicants.