Wilmot & Wellesley Resource Centre
Your Community Support Hub

Holiday Hamper Application 2025

STAFF RECEIVING APPLICATION:	
SPONSOR:	HAMPER NUMBER:

Complete all steps below. Incomplete applications cannot be processed. Please print.

Step 1: Address information. — Address/Contact Information. Please print.

Street #	Street Name	Apt. / Unit #	City	Postal Code

Your phone #	*Alternate phone #	Email Address

If you do not have a phone, please provide the phone number of a friend or family member.

Step 2: Complete the adult and children information below. Use one row per person. See back of form or ID Requirements document.

Adults (Age 18 and over) — PLEASE ATTACH A COPY OF ID & PROOF OF ADDRESS

	Last Name	First Name	D.O.B.	Annual Net Income	Source of Income	POI	POA	Source of Identification
1								
2								
3								
4								

Children (Age 17 and under) — PROVIDE COPY OF ID

	First and Last Name	Age	D.O.B.	Source of Identification
1				
2				
3				
4				
5				
6				

Children (Age 17 and under) — PROVIDE COPY OF ID

	First and Last Name	Age	D.O.B.	Source of Identification
7				
8				
9				
10				
11				
12				

Step 3: Application must be signed.

I declare the information provided, to be correct. I authorize the Christmas Bureau and/or my Sponsor to verify any information including contacting Ontario Works and Ontario Disability Support Program, if necessary.

Signature: _____ Date: _____

APPLICATIONS WILL BE OPEN UNTIL CAPACITY IS REACHED, OR NOVEMBER 30, 2025 (WHICHEVER COMES FIRST)

Please submit the completed application to the Wilmot & Wellesley Resource Centre.
175 Waterloo St., Unit 1, New Hamburg, Mon-Thurs 9am-4:30pm & Fri 9am-4pm, or by email to info@wilmotwellesleyrc.ca

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Holiday Hamper Application Requirements

Eligibility Criteria 2025:

1. Applicants must live in Wilmot Township or Southern Wellesley Township (boundary map available online at wilmotwellesleyrc.ca under 'Holiday Hamper Program')
2. Application must be completed in full (Steps 1, 2, 3). Incomplete forms will not be accepted.
3. Only one hamper per household (may include both food and toys/gift items).
4. The primary parent/custodian may apply for each child.

Documentation Checklist

All applicants need:

[ ] Photo/ID for **yourself and all family members** with current (2025) proof of address.

Acceptable ID documents for adults include Ontario driver's license, passport, Ontario photo card, Canadian citizenship card with photo. Acceptable ID for children includes birth certificate or passport.

And:

If you are:

a). **Recipient of Ontario Works**

[ ] Proof of drug or dental card for yourself/all family members OR Proof of bank direct deposit

OR

b). **Recipient of Ontario Disability Support Program**

[ ] Proof of drug or dental card for yourself/all family members OR Proof of bank direct deposit

OR

c). **Living on Low Income** (refer to the Financial Eligibility Chart below)

[ ] Proof of your **2024 Canada Revenue Agency Notice of Assessment** for yourself/all family members

Take Home Pay (Net Income)

Family Size	Annual	Monthly	Weekly
1	$30,337.05	$2,528.09	$583.40
2	$36,921.90	$3,076.82	$710.04
3	$46,002.56	$3,833.55	$1,103.56
4	$57,385.18	$4,782.10	$1,256.34
5	$65,329.48	$5,444.12	$1,256.34
6	$72,451.33	$6,037.61	$1,393.29
7+	$79,581.93	$6,631.83	$1,530.42

Before Tax

Family Size	Annual	Monthly	Weekly
1	$36,608.00	$3,050.67	$704.00
2	$45,576.96	$3,798.08	$876.48
3	$56,059.66	$4,671.64	$1,078.07
4	$68,056.43	$5,671.37	$1,308.78
5	$77,175.99	$6,431.33	$1,484.15
6	$87,039.08	$7,253.26	$1,673.83
7+	$96,909.31	$8,075.78	$1,863.64

Ensure you have included photocopies of proof of address & proof of income for yourself and anyone else in your household if dropping off at our office; OR photos of the identification documents if emailing the application to our office.

**Individual circumstances will be considered if your income is above the financial eligibility levels. If you are in need, please call our office at 519-662-2731.*

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Gift Wish List for Children/Youth 2025

If you wish, you may provide a gift wish list for each Child/Youth between the ages of 0-17. If including clothing, please list size information. Please print clearly.
Please note that the total gift per child will not exceed $50.

FOR OFFICE USE ONLY: Holiday Hamper #:		
Age:	☐ M ☐ F ☐ other	Wish List: 1.______ 2.______ 3.______
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Age:	☐ M ☐ F ☐ other	Wish List: 1.______ 2.______ 3.______
Age:	☐ M ☐ F ☐ other	Wish List: 1.______ 2.______ 3.______
Age:	☐ M ☐ F ☐ other	Wish List: 1.______ 2.______ 3.______
Age:	☐ M ☐ F ☐ other	Wish List: 1.______ 2.______ 3.______
Do you have pets?		Dog______ Cat______