

**COMMUNITY CARD APPLICATION/SURVEY**
**ADDRESS**

Address		Postal Code	
Phone		Fax	
E-mail		Cell	

**HOUSEHOLD INFORMATION**

Do you	<input type="checkbox"/> rent <input type="checkbox"/> own		
Size of unit	<input type="checkbox"/> studio <input type="checkbox"/> one bedroom <input type="checkbox"/> two bedroom <input type="checkbox"/> three bedroom or larger		
Total number of people		Number of children	
Number of vehicles		Age(s) of children	

**RESIDENT INFORMATION**

<b>Person 1</b>	First Name		Last Name	
Card #	<input type="checkbox"/> Male <input type="checkbox"/> Female			
	<input type="checkbox"/> Single <input type="checkbox"/> Married/Living with partner <input type="checkbox"/> Sharing accommodation			
	Age: (optional) <input type="checkbox"/> under 20 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			
	Associated with SFU: <input type="checkbox"/> No If Yes: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni			
	For which of the following services do you expect to use your Community Card? <input type="checkbox"/> Gym Membership <input type="checkbox"/> Library Membership <input type="checkbox"/> Childcare <input type="checkbox"/> Transit Pass <input type="checkbox"/> Other			

<b>Person 2</b>	First Name		Last Name	
Card #	<input type="checkbox"/> Male <input type="checkbox"/> Female			
	<input type="checkbox"/> Single <input type="checkbox"/> Married/Living with partner <input type="checkbox"/> Sharing accommodation			
	Age: (optional) <input type="checkbox"/> under 20 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			
	Relationship to Person 1: <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Other			
	Associated with SFU: <input type="checkbox"/> No If Yes: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni			
	For which of the following services do you expect to use your Community Card? <input type="checkbox"/> Gym Membership <input type="checkbox"/> Library Membership <input type="checkbox"/> Childcare <input type="checkbox"/> Transit Pass <input type="checkbox"/> Other			

<b>Person 3</b>	First Name		Last Name	
Card #	<input type="checkbox"/> Male <input type="checkbox"/> Female			
	<input type="checkbox"/> Single <input type="checkbox"/> Married/Living with partner <input type="checkbox"/> Sharing accommodation			
	Age: (optional) <input type="checkbox"/> under 20 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			
	Relationship to Person 1: <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Other			
	Associated with SFU: <input type="checkbox"/> No    If Yes: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni			
	For which of the following services do you expect to use your Community Card? <input type="checkbox"/> Gym Membership <input type="checkbox"/> Library Membership <input type="checkbox"/> Childcare <input type="checkbox"/> Transit Pass <input type="checkbox"/> Other			

<b>Person 4</b>	First Name		Last Name	
Card #	<input type="checkbox"/> Male <input type="checkbox"/> Female			
	<input type="checkbox"/> Single <input type="checkbox"/> Married/Living with partner <input type="checkbox"/> Sharing accommodation			
	Age: (optional) <input type="checkbox"/> under 20 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			
	Relationship to Person 1: <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Other			
	Associated with SFU: <input type="checkbox"/> No    If Yes: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni			
	For which of the following services do you expect to use your Community Card? <input type="checkbox"/> Gym Membership <input type="checkbox"/> Library Membership <input type="checkbox"/> Childcare <input type="checkbox"/> Transit Pass <input type="checkbox"/> Other			

<b>Person 5</b>	First Name		Last Name	
Card #	<input type="checkbox"/> Male <input type="checkbox"/> Female			
	<input type="checkbox"/> Single <input type="checkbox"/> Married/Living with partner <input type="checkbox"/> Sharing accommodation			
	Age: (optional) <input type="checkbox"/> under 20 <input type="checkbox"/> 20-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			
	Relationship to Person 1: <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Other			
	Associated with SFU: <input type="checkbox"/> No    If Yes: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni			
	For which of the following services do you expect to use your Community Card? <input type="checkbox"/> Gym Membership <input type="checkbox"/> Library Membership <input type="checkbox"/> Childcare <input type="checkbox"/> Transit Pass <input type="checkbox"/> Other			