

HEADS UP FUND APPLICATION

The CANAAF Heads Up Fund provides financial assistance towards the purchase of a hairpiece for Canadians 13 years of age and older.

Please carefully read the Eligibility Criteria and Terms and Conditions before applying. Completed applications can be sent to headsup@canaaf.org.

Eligibility

CANAAF will contribute up to a maximum of \$750 (CAD) per individual applicant towards the cost of a hairpiece after the approval of the Heads Up Application.

Each application is reviewed by the CANAAF Heads Up Committee on a case-by-case basis.

To be eligible to receive funding you must:

1. Fulfill the requirements of the Heads Up Application process in its entirety, including providing all supporting documentation listed below.

2. Be 13 years of age or older.

3. Have a medical diagnosis of alopecia areata.

4. Demonstrate financial need by submitting an official Notice of Assessment issued by the Canada Revenue Agency. (See #2 below).

5. Be the individual purchasing the hairpiece. You are ineligible to receive funding if someone is purchasing the hairpiece on your behalf. Funding can be applied towards the purchase of a hairpiece or wig only.

Supporting Documentation

In addition to the Applicant Information Form attached, applicants must submit the required supporting documentation. Absence of any of the following supporting documentation will result in immediate refusal of the application:

- 1. Doctor's Diagnosis of Alopecia Areata A letter confirming diagnosis from a physician, or prescription, for a hairpiece within the last twelve months due to alopecia areata.
- **2.** Letter of Intent A letter from the Applicant detailing the benefit of receiving financial assistance for a hairpiece.
- 3. Notice of Assessment The Applicant, or the Applicant's parents, or legal guardian(s) (in the case of a minor), to provide documentation to support financial need including the Notice of Assessment issued to you by the CRA for the most recent taxation year.
- **4. Spouse and/or Common Law Partner's Income** If the Applicant has a spouse or common law partner, the Applicant is to provide information on the spouse and/or common law partner's income, including a Notice of Assessment for the most recent taxation year.

All personal information provided will be managed in accordance with provincial privacy legislation and the Personal Information Protection and Electronic Documents Act.

Sending Your Supporting Documents

The applicant information form and supporting documentation may be scanned (PDF) and emailed to <u>headsup@canaaf.org</u>. Any documents received as an image (jpg, jpeg, png etc.) will NOT be reviewed by the CANAAF Heads Up Committee.

OR

mail to 227 Burton Grove, King City, Ontario, L7B 1C7 to the attention of Heads Up Fund/CANAAF.

Terms and Conditions

1. CANAAF will confirm in writing to the Applicant that it has received the application and will review the application and supporting documentation within 45 days of receipt of the completed application. CANAAF will advise you of its decision in writing within 60 days of receipt of the completed application.

2. If the applicant receives a letter of approval from CANAAF, a hairpiece must be purchased within a 12 month period from the time of approval.

3. CANAAF will consider the Applicant's financial circumstances and need in determining whether to approve the Applicant for financial assistance.

4. An Applicant may reapply for financial assistance after two (2) years of receiving funding through the Heads Up Program. Any application received within the 2 years will be denied.

5. In the event the Applicant purchases a hairpiece before approval, only purchases made within 60 days of receipt of the Application will be considered.

6. CANAAF will consider first time applications before considering any applicants who have already received funds under the Heads Up Program.

7. CANAAF will contribute up to a maximum of \$750.00 (CAD) towards the cost of a hairpiece that has been purchased after the approval of the Heads Up Application. The Applicant must provide a copy of the receipt for the hairpiece purchased, along with proof of payment in full, in order to receive the financial contribution. In the event the Applicant cannot afford the upfront cost of the hairpiece, the Applicant must advise CANAAF of the supplier or retailer where the hairpiece will be purchased and CANAAF will pay the approved financial contribution directly to the supplier/retailer.

8. The submission of a completed application in no way binds, or requires, CANAAF to financially assist the Applicant in purchasing a hairpiece. Only applications as approved by CANAAF will receive financial assistance.

9. The application and supporting documentation will be kept confidential and shared only with the representatives of CANAAF who review and approve the applications.

10. CANAAF does not in any way warranty or guarantee the quality of the hairpiece purchased and it is the Applicant's responsibility to investigate the quality of the hairpiece being purchased.

Applicant Information Form

First Name:	Middle Name: _	Last Name:	Last Name:				
Street Address:		Apt/PO Box #					
City:	Province:	Postal Code:	Postal Code:				
Email:		Phone:					
Date of Birth:							
What type of hair loss does the applicant have?							
Alopecia Areata	Alopecia Totalis	Alopecia Universalis	Other				
If other, please specify: _							
What is the applicant's marital Status?							
Single	Married	Common Law Othe					
If other, please specify: _							
Have you already purchased the wig/hair piece you wish to receive funding for?							
, , , ,	Yes	No	U				
Have you previously applied to the Heads Up Fund?							
	Yes	No					
If yes, what year did you apply?							

How did you hear about the Heads Up Fund?						
CANAAF Newsletters	CANAAF Website	CANAAF Fac	ebook	CANAAF Instagram		
	CANAAF Twit	ter Other				
If other, please specify:						
Applicant Signature: Parent/Guardian Signatu			Date:			
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If you have any questions regarding the Heads Up Fund and/or the application process, please email **headsup@canaaf.org** or call our main office at (905)833-1619

CANAAF OFFICE USE ONLY

Signature of Authorized Board Member: Date: Approved On: