



EMERGENCY FINANCIAL ASSISTANCE - WGA & SAG-AFTRA STRIKES

The AFC supports entertainment industry professionals working in TV and film, music, theatre, and dance. The AFC can provide short-term emergency financial assistance for essential household bills and costs that cannot otherwise be paid. This assistance is based on immediate financial need.

Our goal is to help the largest possible number of applicants with their most critical needs. Right now, we are focusing on making sure that people can meet their expenses for the next **4-8 weeks**. At this time, we cannot consider requests for payments for more than **one month at a time**. The AFC **does not provide income replacement or ongoing assistance**.

To receive financial assistance, you need to:

- Be professionally eligible:
 - Are working age and have earned the majority of your income from entertainment industry work in the period from 2019 until present
- OR
- Are over 65 and have earned the majority of your income from the industry over your working life;
- Demonstrate urgent financial need (have less than 8 weeks living expenses in the bank);
- Make all reasonable efforts to support yourself through other resources;
- Provide the required information and documents.

<p>The AFC can help with costs like:</p>  <ul style="list-style-type: none">• Rent or mortgage• Grocery costs• Transportation costs• Medical costs• Emergency dental costs• Utility costs• Phone and internet (\$150 max.)	<p>We cannot assist with:</p>  <ul style="list-style-type: none">• Life insurance• Income tax• Credit card payments• Loan payments• Education costs• Business costs• Cable TV• Agent fees and photos• Union initiation fees
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Personal Information

Your Name

Profession

Date of Birth

DD MM YYYY

Age

Tell us what is happening and the nature of your emergency:

Email Address

Address

Apt #

City

Prov/Terr

Postal Code

Phone Number

Do you have legal Canadian work status?

☐ Yes ☐ No

☐ OK to leave voicemail here

Do you live with...

☐ Parents ☐ Roommates (#) ☐ Alone

☐ Children (#) ☐ Spouse / Partner

☐ Other, please describe _____

Dependants

I have children, ages

Do your children live with you full time?

☐ Yes ☐ No ☐ Part Time Describe arrangement: _____

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Need help?

The more complete the application, the faster we will be able to process it - feel free to attach extra notes or explanations.

Entertainment Industry Status

How long have you worked in the Canadian entertainment industry?

Professional affiliations (eg. ACTRA, IATSE 873)

How long have you been a member of your current union?

☐ Please provide documentation to demonstrate your professional eligibility such as a **union work history/earnings report** or **T4s** for each year since 2019. *

* We are considering documentation from 2019 because many industry workers earned little or no income in the industry in 2020 due to the pandemic.

Assistance Requested

Please itemize the costs that make up the total amount you are requesting. If you do not list a cost here, it will not be considered part of your request.

Item	Amount
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>

Total amount you are requesting from The AFC to help you with this emergency

Please note The AFC cannot provide ongoing or recurring assistance.

☐ Please provide a copy of your lease, mortgage agreement, or other documents to show your housing costs (screenshots of rent/mortgage payment) if requesting support with these costs.

☐ Please provide documentation of the costs you are asking for support with - e.g. phone bill, utility bills, medical bills (NOT including food, transit, and fuel.)

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The AFC cannot provide ongoing or recurring assistance.



Common requests include...

- Rent or mortgage
- Grocery costs
- Transportation costs
- Medical costs
- Emergency dental costs
- Utility costs
- Phone and internet (\$150 max.)



We cannot assist with...

- Life insurance
- Income tax
- Credit card payments
- Loan payments
- Education costs
- Business costs
- Cable TV
- Agent fees and photos
- Union Initiation Fees



Supporting Documents

In order to help us verify your costs, please provide documentation. For example:

- Bills
- Lease
- Dentist's estimate
- Bank statements showing automatic withdrawals

We do not require documentation for food, transit and fuel.

Financial Situation

Current Cash on Hand

Personal Chequing Current Balance ☐ This is a joint account

Personal Savings Current Balance

Other Accessible* Money Describe: _____

*Accessible Money could include emergency funds, TFSAs, or other accounts with no penalties or restrictions on withdrawing the money.

Is there anything else you want us to know about your current cash on hand?

☐ Please provide a screenshot of your current account balances.

Personal Income Overview

Amount

Describe Source

2022 entertainment industry income	<input type="text" value="\$"/>	Entertainment industry
2022 income from other sources (if any)	<input type="text" value="\$"/>	<input type="text"/>
2021 entertainment industry income	<input type="text" value="\$"/>	Entertainment industry
2021 income from other sources (if any)	<input type="text" value="\$"/>	<input type="text"/>
2020 entertainment industry income	<input type="text" value="\$"/>	Entertainment industry
2020 income from other sources (if any)	<input type="text" value="\$"/>	<input type="text"/>
2019 entertainment industry income	<input type="text" value="\$"/>	Entertainment industry
2019 income from other sources (if any)	<input type="text" value="\$"/>	<input type="text"/>

Corporate Status and Income

Are you incorporated? ☐ Yes ☐ No

(if incorporated) Corporate Account Balance(s)

2022 Corporate Gross

2021 Corporate Gross

2020 Corporate Gross

2019 Corporate Gross

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Tips

Estimates are always better than blank spaces.

Answer each question, write \$0 if you need to.

You must report all sources of income. We may ask you to provide personal or corporate tax returns for clarification.

If you need more space, feel free to provide more information in a separate document.

If a field is not applicable, please enter "N/A" rather than leaving it blank.

If you don't remember or know the start date, you can put 'unknown'.

If you don't know the end date, you can put 'unknown.'

Please note:

We are considering information from 2019 because many industry workers earned little or no income in the industry in 2020 due to the pandemic.

Financial Situation

Current Monthly Income

<input type="checkbox"/> Employment	Per month \$	(Expected) Start Date	End Date
<input type="checkbox"/> EI	Per month \$	(Expected) Start Date	End Date
<input type="checkbox"/> Canada Child Benefit	Per month \$	(Expected) Start Date	End Date
<input type="checkbox"/> Welfare	Per month \$	(Expected) Start Date	End Date
<input type="checkbox"/> Pension	Per month \$	(Expected) Start Date	Source (ie. CPP, OAS)
<input type="checkbox"/> Disability	Per month \$	(Expected) Start Date	Source (ie. CPP, OAS)
<input type="checkbox"/> Other	Per month \$	Source	
<input type="checkbox"/> Alimony / Child Support	Per month \$		

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If you don't remember or know the start date, you can put 'unknown'.

If you don't know the end date, you can put 'unknown'.

Partner's Financial Situation (if applicable)

Partner's Profession	
Partner's Annual Income (approx)	
Partner's expected income in the next 30 days from all sources	

Describe those sources (e.g. employment income, EI, pension, etc)

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Average Monthly Expenses

Housing	<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage	\$	per month
Property tax		\$	per month
House / apartment insurance		\$	per month
Utilities (gas, hydro, water)		\$	per month
Phone and internet		\$	per month
Transit		\$	per month
Gas		\$	per month
Car payment		\$	per month
Car insurance		\$	per month
Food		\$	per month
Other	<input type="text"/>	\$	per month
Other	<input type="text"/>	\$	per month
Other	<input type="text"/>	\$	per month
Other	<input type="text"/>	\$	per month
Other	<input type="text"/>	\$	per month

Total average monthly expenses	\$	per month
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Is there anything else you would like us to know about your household finances?

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Tips

This information helps us build a picture of your usual financial situation.

Some common other monthly expenses include:

- Child support
- CRA payments
- Medical expenses

If the cost of any particular item (eg. Utilities) varies, please give an average or estimate.

If you live with roommates, please only enter your personal costs.

The AFC will typically expect all household members to contribute to basic needs as their income and assets permit.

If this is not the case in your household, please explain your situation.

Other Types of Assistance

What other types of assistance have you investigated?

- ☐ Union benefits ☐ Borrowing against assets ☐ Government assistance
☐ EI ☐ Credit ☐ Friends or relatives ☐ Other

If Other, please describe

Please provide any details of the assistance you have received or investigated, including dates and amounts? (Including, for example, looking into negotiating or deferring payments e.g. utility bills, rent, or support from friends and family.)

Is there anything else you would like us to know about your situation?

Declaration

I, _____ (print name) by my signature, authorise The AFC, staff and members of its disbursement committee to conduct any inquiries with, including, but not limited to, banks, credit bureaus, landlords, agents, etc., as may be deemed necessary to expedite the decision on the application.

I understand that The AFC is under no obligation to provide assistance and that decisions of the Board are final. I agree that the decision of the Board to grant or not grant assistance cannot form the basis of a legal action against The AFC.

I certify that the information given on this application and on any documents attached is correct and complete and fully discloses my present situation and my income from all sources.

Dated this _____ day of _____, 20 ____

Signed _____

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Info

Please feel free to attach additional pages.

Being proactive in exploring other options and long term plans reflects favorably on an application.

This includes looking into and exploring the options available.

Application Checklist and Next Steps

Your application cannot be processed without:

- ☐ Application form, fully completed
- ☐ Documentation of professional eligibility - union work history/ earnings report or T4s
- ☐ Screenshot(s) showing bank account balances
- ☐ (If requesting rent) lease, mortgage agreement, or other documents to show your housing costs (screenshots of rent/mortgage payment)
- ☐ Documentation of other costs for each item on assistance requested list, such as utility bills, phone bills, medical costs (NOT food, transit, or fuel)
- ☐ Automatic deposit form or void cheque

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What next?

Submit your application and required documentation **by email to**
contact@AFChelps.ca

If you have not received an acknowledgment email within one week, please follow up by email or phone.

The Application Process

