



Department of  
Agriculture

**Future Farmer Program  
Business Risk Management  
Reimbursement Form**

The Future Farmer Program will reimburse for one year -- 50% of an applicant's costs associated with enrollment in the PEI AgrilInsurance Program and/or 50% of an applicant's program fee in AgriStability. Maximum assistance \$2,000/applicant for the one year of reimbursement.

|                                      |                   |
|--------------------------------------|-------------------|
| Last Name:                           |                   |
| First Name:                          | Middle Name:      |
| Corporation Name (if applicable):    |                   |
| Address (including postal code):     |                   |
| Issue Cheque to (✓):                 |                   |
| <input type="checkbox"/> Applicant   | SIN: _____        |
| <input type="checkbox"/> Corporation | Business #: _____ |

|  |          |
|--|----------|
| <b>Reimbursement Amount</b> - Please submit original receipt from the PEI Agricultural Insurance Corporation |          |
| <input type="checkbox"/> PEI AgrilInsurance <b>OR</b><br><input type="checkbox"/> AgriStability Program      | \$ _____ |

|  |
|--|
| <b>Applicant Declaration and Signature</b>   |
| Applicants by submitting a claim: <ul style="list-style-type: none"> <li>• certify that the information provided is complete and correct</li> <li>• consent to the release of the information contained on this application to officials of Agriculture and Agri-Food Canada and the Prince Edward Island Department of Agriculture for the purposes of audit, analysis, evaluation, and program development in accordance with their respective privacy acts</li> </ul> |
| Date of Claim: _____ Applicant Signature: _____  |

Personal information on this form is collected under Section 31(c) of the *Freedom of Information and Protection Privacy Act* R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for the Future Farmer Program and will be used for determining eligibility for program assistance and issuing tax related receipts. If you have any questions about this collection of personal information, you may contact the Future Farmer Program Manager, PEI Department of Agriculture, PO Box 1600, Charlottetown, PE, C1A 7N3, 902-368-5647. Information may be verified.

|  |            |
|--|------------|
| <b>FOR OFFICE USE ONLY - Payment Authorization</b> |            |
| Amount: \$ _____                                   |            |
| Date:  | Invoice #: |
| Account #:   | Batch #:   |
| Authorization:                                     |            |