



Labrador Air Access Program Application

APPLICATIONS MUST BE SUBMITTED A MINIMUM OF 28 DAYS IN ADVANCE OF TRAVEL TO BE ELIGIBLE FOR ASSESSMENT.

Section 1: Application Information:

Last Name: _____ First Name: _____ Phone Number: _____

MCP# _____ MCP Expiry Date: _____

Residential Address: _____ Town: _____ Province: _____ Postal Code: _____

Mailing Address (If different): _____ Town: _____ Province: _____ Postal Code: _____

Email: _____

Information is being collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015, for the purpose of administering the Labrador Air Access Program (LAAP), which provides subsidized airfare for eligible residents of Labrador and the Northern Peninsula for **personal or leisure travel** within Newfoundland and Labrador.

This program involves the collection of personal information such as MCP numbers, date of birth, residential addresses, and travel details to verify eligibility and facilitate access to discounted flights through a partnership with PAL Airlines. The information may also be used to monitor compliance with program terms and conditions.

Any information that may be received will be governed in accordance with the Access to Information and Protection of Privacy Act, 2015 and will only be used for the purpose of administering and evaluating the LAAP.

If you have any questions about how this information will be collected, used, and disclosed, please call our toll-free number: 1-888-435-8111 or email: LabradorAirAccess@gov.nl.ca

Is this travel being subsidized from another source besides employee travel benefits and the Labrador Air Access Program?

Are you traveling for work? _____ If yes, this subsidy cannot be used for work related travel.

Section 2: Traveler Information – Please list all travelers below, including the applicant.

Maximum of 5 travelers per subsidy and they must all reside in the same household.

Listing all travelers does not mean they are guaranteed to be on the same flight or will receive the subsidy.

Number	Last Name	Given Names	MCP #	Residential Address
1				
2				

3				
4				
5				

Select the option that applies to you:

Are you applying for: One Way? (If yes, go to Section 3) Return? (If yes, go to Section 4)

Section 3: One-way Travel

Does the flight originate in Labrador, Blanc Sablon or St. Anthony?

If yes, please complete your Trip Details in Section 4 and include your anticipated return date.

Is this the return portion of your flight? If yes, please complete your return Trip Details in Section 4.

Section 4: Details of Travel – Please only provide the information requested. Do not include any unnecessary personal information.

Trip Details - Changes or cancellations must be made no less than 72 hours in advance of travel with a fee of \$50.00 plus HST.

Preferred Date of Departure (YYYY/MM/DD): _____

Preferred Date of Return (YYYY/MM/DD): _____

If booking a return flight, please check the box and pick from the airport options below:

Departure Airport	Arrival Airport

If booking a one-way flight, please check the box and pick from the airport options below:

Departure Airport	Arrival Airport

If you are a student, please check the box and pick from the airport options below:

Departure Airport	Arrival Airport

***Please note: Students are required to provide proof of enrollment in post-secondary.**

Section 5: Declaration of Eligibility for the Labrador Air Access Program – This declaration must be signed by all travelers listed in this application that are 18 years of age or older. Travelers under the age of 18 must have a parent or guardian sign this form on their behalf. Unsigned applications are considered incomplete and will be returned for a signature. An electronic signature may be used (typed name will be considered as well).

- ☐ I declare that the information provided on this application is true and correct to the best of my knowledge.
- ☐ I declare that I am a resident of Labrador or the Northern Peninsula, as outlined by the Labrador Grenfell Zone (see Annex A of application).
- ☐ I understand that this information is collected by the Department of Labrador Affairs pursuant to section 61(1)(c) of the Access to Information and Protection of Privacy Act, 2015 as such information relates directly to and is necessary to, and will be used to determine eligibility in accordance with, the Labrador Affairs Air Access Program criteria and conditions.
- ☐ I understand that there are a fixed number of seats at the subsidized rate and that flights are subject to availability at the time of booking.
- ☐ I understand that despite listing all travelers for a group booking on one application, it does not mean that all travelers will be on the same flight and/or be approved for the subsidy.
- ☐ I understand that the flight must originate in Labrador, Blanc Sablon or St. Anthony.
- ☐ I declare that the ticket has not been subsidized through another program or purchased or reimbursed in full or in part by another organization.
- ☐ I declare that the ticket is not being used for a work-related flight.
- ☐ I understand that changes or cancellations must be made at least 72 hours in advance of Departure and will require a fee of \$50.00 plus HST for each passenger.
- ☐ I understand that all tickets purchased under the Program are non-refundable, the air carrier travel credit is only available for cancellations made by the traveler at least 72 hours in advance of departure, subject to the fee of \$50 + HST.
- ☐ I understand that the first checked bag is free, and the second bag is \$40.00 plus HST.
- ☐ I understand that I am unable to obtain more than two return tickets (or equivalent one way tickets) under the Labrador Air Access Program up to March 31, 2026.
- ☐ I understand and agree that the information I submit may be subject to verification by officials of the Department of Labrador Affairs and that travel subsidized to me in error is subject to recovery by the Department of Labrador Affairs.
- ☐ I authorize the Department of Labrador Affairs to contact and share information with the air carrier for the purpose of travel services received.

I hereby declare that all the information above is true and correct to the best of my knowledge. I am the person named on this form, and I am a resident of Newfoundland and Labrador. In lieu of a written signature my typed name on the form shall be considered my electronic Signature.

Applicant's Signature: _____	Date: _____
Applicant's Signature: _____	Date: _____
Applicant's Signature: _____	Date: _____
Applicant's Signature: _____	Date: _____
Applicant's Signature: _____	Date: _____

Completed claims can be emailed to:

LabradorAirAccess@gov.nl.ca

Steps to Submit Application Form:

1. Save your completed application form
2. Click the "attach form" button above to attach your completed form to your email
3. Email your attached application to LabradorAirAccess@gov.nl.ca
4. Once submitted, you will receive an automatic reply acknowledging your email
5. If you do not receive an automatic reply acknowledging your email, please call the Labrador Air Access Program, at 1-888-435-8111.

Annex A: The Labrador Grenfell Zone includes all communities in Labrador and the following Newfoundland communities:

Labrador Grenfell Zone Newfoundland Communities	
Anchor Point	Nameless Cove
Bear Cove, Northern Peninsula	New Ferrolle
Bide Arm	Noddy Bay
Big Brook	North Boat Harbour
Bird Cove	Pigeon Cove
Black Duck Cove, Northern Peninsula	Pines Cove
Blue Cove	Plum Point
Brig Bay	Pond Cove
Cape Norman	Quirpon
Cape Onion	Raleigh
Conche	Reef's Harbour
Cook's Harbour	Roddickton
Croque	Sandy Cove, Northern Peninsula
Deadman's Cove	Savage Cove
Eddies Cove	Ship Cove, Northern Peninsula
Englee	Shoal Cove East
Flower's Cove	Shoal Cove, Northern Peninsula
Forresters Point	St. Anthony
Goose Cove East	St. Anthony (Airport)
Great Brehat	St. Anthony Bight
Green Island Brook	St. Barbe
Green Island Cove	St. Carol's
Griquet	St. Juliens
Gunners Cove	St. Lunaire
Hay Cove	Straitsview
L'Anse aux Meadows	Wild Bight
Main Brook	