



2009 Application for Financial Assistance

APPLICATION CHECKLIST

- All blanks in Steps 1, 2 and 3 are filled in and complete.
- Formal proof of family income is attached as requested by the Funding Policies on page 3 of this application. **Applications will not be processed without required forms.**
- Please apply for sessions starting between deadlines at the earlier deadline. For example if one session of your sport is Oct to Dec, and the second is Jan to March, apply for both in October.
- Application must be received by no later than APRIL 30th or OCTOBER 15th**

Administered by



Corporate Partner



STRONGER COMMUNITIES TOGETHER™

APPLICATION TO THE KIDSPORT™ FUND

STEP 1 CHILD INFORMATION

Child's Name (Last): _____ (First): _____

Address: _____

City: _____ Postal Code: _____

[] Male [] Female Age: _____ Birth date: Year _____ Month _____ Day _____

Total Number of **Dependent** Children (Age 18 and Under) in Household _____

Has this child ever received KidSport™ funding assistance before? [] Yes [] No **If YES when?** _____

Sport which child will be participating in: _____ Number of years in this sport: _____

Sport Organization/Club Participating in: _____

Total Registration Fee: _____ Portion Family can Pay: _____ **Funding Request:** _____

I authorize KidSport and the Sport Organization to discuss the status of my application

Parent/Sponsor/Guardian Signature _____ **Date :** _____

STEP 2 PARENT / SPONSOR / GUARDIAN INFORMATION

The parent/guardian/sponsor will act as the contact person for the child and will receive all correspondence.

Name (Last): _____ (First): _____

Address (if different from Child's): _____ Postal Code: _____

Telephone Home: _____ Telephone Work: _____ Cell: _____

E-Mail: _____ Fax: _____

Relationship to Child (i.e. Parent/Sponsor/Guardian/other): _____

Please check one: Single Parent Family [] Married [] Common-law []

Do either of the following apply to your family? Social Assistance [] Foster Parent []

If YES, proof of status must accompany application.

STEP 3 SPORT INFORMATION (Take form to your Sport Organization/Club for completion.)

Sport Organization/Club: _____

Cheque to be made payable to: _____

Sport Organization Mailing Address: _____ Postal Code: _____

Sport Organization Contact: _____ Position: _____

Sport Organization Signature: _____ Telephone: _____

Sport Registration Fee: \$ _____ (not including fundraising bonds, canteen bonds, pictures etc.)

Program Dates: (Start) _____ (End) _____

