



## 2011 Application for Financial Assistance

### APPLICATION CHECKLIST

- All blanks in Steps 1, 2, 3, and 4 are filled in and complete.
- Formal proof of family income is attached as requested by Funding Policies A and G on page 2 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 Mar, apply for both in October.
- Application must be received by the correct Regional Office no later than APRIL 30<sup>th</sup> or OCTOBER 15<sup>th</sup> (or JULY 15<sup>th</sup> in Westman and Winnipeg ONLY)**

Administered by



Corporate Sponsor



STRONGER COMMUNITIES TOGETHER™

# Application to the KidSport™ Fund for Financial Assistance

## STEP 1 CHILD INFORMATION

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Male  Female Birth Date: Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

Number of Dependent Children in Family (Age 18 and Under): \_\_\_\_\_

Has this Child Ever Received KidSport™ Funding Assistance Before?  Yes  No If YES when? \_\_\_\_\_

Sport Child will be Participating in: \_\_\_\_\_ Number of Years in Sport: \_\_\_\_\_

Registration Fee: \$ \_\_\_\_\_ Minus Portion Family Will Pay: \$ \_\_\_\_\_ = **Funding Request:** \$ \_\_\_\_\_

**I authorize KidSport and the Sport Organization to discuss the status of this application.**

Parent/Sponsor/Guardian Signature \_\_\_\_\_ Date : \_\_\_\_\_

## STEP 2 PARENT / SPONSOR / GUARDIAN INFORMATION

**Note: The parent/guardian/sponsor will act as the contact person for the child & will receive all correspondence.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Please check one:  Single Parent  Married  Common-Law

**If Married or Common-Law, please include both partner's income when indicating total household annual income.**

Do any of the following apply to your family?  Social Assistance  Foster Parent

**IF YES, Proof of Status must accompany application – See Funding Policy "G"**

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

Sport Organization/Club: \_\_\_\_\_

Cheque to be Made Payable to: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_

Sport Organization Signature: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

Program Dates: (Start) \_\_\_\_\_ (End) \_\_\_\_\_

**STEP 4 FINANCIAL INFORMATION****Last Name:****Employment Income**

Parent/Guardian # 1 – Name: \_\_\_\_\_ Total Income: \$ \_\_\_\_\_/year

Parent/Guardian # 2 – Name: \_\_\_\_\_ Total Income: \$ \_\_\_\_\_/year

YES, I receive the following (*please check all boxes that apply to you*): **Child Support Payments** \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ /year **Spousal Support Payments** \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ /year **Education Income Assistance** \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ /year

\*\* Includes Student loans, Band Scholarships, etc.

 **Insurance – Life, Disability, EI** \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ /year **Other Income** \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ /year**TOTAL ANNUAL HOUSEHOLD INCOME:** \$ \_\_\_\_\_The Notice of Assessment(s) provided accurately reflects my current financial situation.  Yes  No  
If NO, provide a letter explaining and proof of your current financial situation (ex: pay stubs)**PLEASE NOTE: PROOF OF INCOME MUST ACCOMPANY APPLICATION – SEE FUNDING POLICY “A”****FUNDING POLICIES**

- A) A copy of Canada Customs and Revenue Agency Notice of Assessment must be provided. **Applications will not be processed without proof of income and additional financial information may be requested.** If you do not have your most recent Canada Customs and Revenue Agency Notice of Assessment, contact Revenue Canada at 1-800-959-8281.
- B) Financial assistance to individual athletes is designed to help children ages 18 and under who would not play a sport without KidSport™. Preference is given to children being introduced to a sport.
- C) Financial assistance is disbursed up to a maximum of \$300 in a calendar year per athlete.
- D) Sport activities must be affiliated with organizations recognized by Sport Manitoba.
- E) Cost relating to camps, travel, championships, uniforms, etc. do not qualify.
- F) Funding cheques are sent directly to Sport Organizations/Club.
- G) If you are a Foster Parent for the child applying, or on Social Assistance, please provide proof of Foster Parent Status or Social Assistance.
- H) To view the low income cutoff levels used by KidSport™ Manitoba, please visit:  
[http://www.kidsportcanada.ca/index.php?page=manitoba\\_how\\_to\\_apply](http://www.kidsportcanada.ca/index.php?page=manitoba_how_to_apply)

# WHERE DO I MAIL OR FAX THE FORM?

## Sport Manitoba - Central Region

225 Wardrop Street, Morden MB, R6M 1N4, 204-822-6735 (Fax) – 204-822-2915

### QUESTIONS?

**Call KidSport Toll Free at 1-866-774-2220**

**ANNUAL DEADLINES: April 30 July 15 (Westman & Winnipeg ONLY) October 15**

**Applications must be complete and received in the Regional Office by the deadline to be considered. If you need help completing this form please call number above for assistance.**