



Gloucester Cumberland Girls Hockey Association

Application for Financial Assistance

Through the GCGH's Financial Assistance Policy, financial assistance is available for GCGH players who would otherwise be unable to participate or whose families would suffer undue hardship as a result of the GCGH registration fee and other non-discretionary expenses. Need is the primary consideration in approving an application for assistance.

To be considered for assistance, this application must be completed in full and include a brief explanation as to why assistance is needed. Applicants must submit copies of the family's Canada Revenue Agency (CRA) Notice of Assessments and a recent pay stub as proof of family income. Applications will be held in confidence by the Financial Assistance Committee.

The GCGH encourages families to seek financial assistance from other available sources, including the Canadian Tire Jump Start fund, Grindstone Award Foundation, and the Hockey Canada Assist fund. When reviewing an application for financial assistance, the Financial Assistance Committee will consider an applicant's application or intentions of applying for other sources of financial assistance.

An interview with the Financial Assistance Committee may be required.

Section A: Player Information

Player's Name: _____

Date of Birth: _____

Address: _____

Telephone Number(s): _____

Team Last Year (if applicable): _____

Section B: Parent/Guardian Information

Parent/Guardian 1 Name: _____

Address (If different from Section A): _____

Telephone Number: _____

E-mail Address: _____

Parent/Guardian 2 Name: _____

Address (If different from Section A): _____

Telephone Number: _____

E-mail Address: _____



Section C:

Parent/Guardian 1 Gross Income: _____

Parent/Guardian 2 Gross Income: _____

Number of children in family: _____ Ages: _____

Number of children in hockey: _____ Ages: _____

Is the player(s) registered this season? _____

Please submit a copy of your CRA Notice of Assessment for the most recent tax year and a recent pay stub.

Section D – Other Information

What types of financial assistance are you seeking (select all that apply):

_____ Payment of registration fees

_____ Payment of team fees

_____ Reimbursement of other non-discretionary hockey-related costs throughout the season

Are you able to pay a portion of registration and/or team fees? _____ If Yes, please provide details:

Have you requested or do you intend to seek other sources of financial assistance (i.e. Jumpstart; Sponsorship). _____ If Yes, please provide details:



Section E

Please explain in detail why assistance is needed for this player.

Date: _____ Name: _____

Application to be submitted to the Financial Committee
when complete - financialassistance@gcgh.ca