



KidSport™ Okotoks & MD of Foothills Application

Date Received: _____

1. Information About the Athlete

Name: _____

Age: _____ Birthday: _____
month / day / year

Gender: M / F # of Siblings: _____

Address: _____

City: _____ Prov: Alberta

Postal Code: _____ Phone: (____) _____

Funding goes directly to the organization/sport program in which an athlete is registered.

Name of Organization: _____

For What Sport: _____

Date Program Starts: _____

Contact Name: _____

Address: _____

City: _____ Prov: Alberta

Postal Code: _____ Phone: (____) _____

Subsidy from Organization: \$ _____
(If applicable)

Proof of Registration: _____
(Signature of Organization Representative)

Date: _____

2. Information About the Sponsor

PARENT, SOCIAL WORKER, TEACHER, RELIGIOUS LEADER ETC

If the sponsor is the athlete's parent/guardian, some of the following information may be the same as above. Please indicate "same as above" in the spaces where information is the same.

Name: _____

Relationship to Athlete: _____

Address: _____

City: _____

Prov: Alberta Postal Code: _____

Home Phone: (____) _____

Work Phone: (____) _____

Sponsor's Signature: _____

Date: _____

4. Funding Requirements

TO BE COMPLETED BY THE SPONSOR & THE SPORT PROGRAM

Based on the above sport program, KidSport may provide up to \$250/year.

- | | | | |
|----|---|------|--------|
| 1. | Total Sport Organization Registration fee | \$ | _____ |
| 2. | Minus subsidy from Sport Organization | - \$ | _____ |
| 3. | = amount requested from KidSport™ | = \$ | _____* |

5. Reason for Funding Requirements

Documents that help verify your family's financial situation need to be included for your application to be accepted. Please make sure you submit TWO different sources for each working adult in the household (family income). Please send in photocopies of the original document.

PLEASE CHECK MARK ONE BOX FROM EACH SECTION (A and B) AND INCLUDE COPIES WITH YOUR APPLICATION (required):

SECTION A

- Employee pay stubs:** Please send in copies of your three most current pay stubs
- Income Support stubs:** Formerly known as Support For Independence (SFI)
- Assured Income for the Severely Handicapped (AISH)** stubs
- Workers Compensation Board (WCB)** pay stubs
- Employment Insurance (EI)** stubs

SECTION B

- Alberta Child Health Benefit Card (Alberta Works):** Please send in a photocopy of the card AND the letter that verifies your length of coverage. This is **NOT** the Alberta Health Care Card
- Canada Child Tax Benefit Notice:** This form lists your family income and marital status for the most current tax year
- Notice of Assessment:** This is the form you receive from the Canada Revenue Agency (CRA) after filing your taxes. Please send in a copy that applies to the most recent tax year

SECTION C

We understand that it is not always easy to ask for help. We also understand that there are other situations that may lead to a family needing assistance. Please take a moment and tell us why this application should be considered for funding (Please attach a separate sheet).

6. Parental / Guardian Confirmation

KidSport™ requires authorization from every athlete's parent / legal guardian if the parent/legal guardian is not the sponsor.

Signature of Parent/Guardian: _____

Date: _____

7. Mail in Application Form

Please seal & mail in applications to:

KidSport™ Okotoks
PO Box 1348
Okotoks, Alberta T1S 1B3

For more info call:
KidSport™ Okotoks 403-831-PLAY (7529)
Or KidSport™ Society of Alberta 1-888-914-KIDS

www.kidsport.ca

3. Sport Program Information

THIS SECTION TO BE FILLED OUT BY A SPORT CLUB REPRESENTATIVE TO BE FUNDED

Privacy Statement: The KidSport™ Society of Alberta and KidSport™ Okotoks agree that any information provided by the applicant shall be retained by KidSport™ and shall not be released to any other party without the express written consent of the applicant (other than to the sport organization for which funding has been requested).