Sport Program Funding Request Form 2021

	Box	Field	W.F.	Other
Club/league:	Sector(s):			
	6	J 8U 10U 12l	J 14U 17U	Jr. Sr.
Contact Name:	Age group(s):			
Contact email:	Sport Initia	tion High Perfo	ormance Sp	ort 4 life
Contact phone:	Project name:			

1. Project description:

2. What are the mission, vision, and core values of this project?

3. Is this a new project for 2021? If no, please explain the history of this program. If yes, please describe the programs this may be replacing (if any):

4. What are the measurable outcomes of the project? (I.e., increase retention of new athletes by 20%, increase female participation by 25%, etc.)

5. Please list all project team members and their roles:

Name

Role

6. Please provide a detailed budget of the project: