



The Hart of The Game Fund Application Form

Please complete the application in full. Incomplete applications will not be considered. All information will be kept private and confidential.

1. This application must be completed in its entirety to be considered for assistance of fees. The deadline for receipt of this application to the Vice President will be September 15. Applications may not be accepted after this date.
2. Fill out Section A with the Parent or Guardian’s Name, Address and Phone Numbers.
3. Families on social Assistance may skip Section B and C by providing either:
 - A current statement from Social Services certifying that the applicant is on social assistance and the player(s) is/are dependent(s) of the applicant; or
 - Documents to prove the same; i.e. copy of current Social Services Medical Service Card
4. All other applicants **MUST** complete Section B and provide the following documents to support the application.
 - Photocopy of your last years Notice of Tax Assessment (statement issued by Revenue Canada taxation office is accepted), or
 - Photocopy of your Options C printout
(Available by contacting Canada Customs and Revenue Agency 1-800-959-8281)
5. Complete Section C if there are exceptional circumstances that are impacting your ability to pay the fee(s). You must provide detail information with supporting documents such as the following:
 - Photocopies of your current reporting card and cheque stub for Employment Insurance Benefits (name and amount received must be visible)
 - Letter from your present employer stating your current gross income
 - Letter from school/university you are attending full time or photocopy of your student loan Notice of Assessment
6. Sign and mail the completed application form with supporting document(s) to:
Wetaskiwin Minor Hockey Association
c/o The Hart of The Game Fund
Box 6481
Wetaskiwin, AB T9A 2G2
OR email to vp.wmha@gmail.com

**** Mark Confidential on the envelope**
7. You will be notified of a decision in writing within approximately three weeks. If you are approved for assistance through the Hart of the Game Fund, there will be an additional volunteer commitments required to help support the WMHA.
8. The following chart of income levels outlines how the waiver of fees will be determined.

of Adults and children

<u>Per Household</u>	<u>75% Assistance</u>	<u>50% Assistance</u>
2 persons	\$25,000	\$25,001-\$30,000
3 persons	\$30,000	\$30,001-\$35,000



4 persons	\$35,000	\$35,001-\$40,000
5 persons	\$40,000	\$40,001-\$45,000
6 persons	\$45,000	\$45,001-\$50,000
7 persons or more	\$50,000	\$50,000-\$55,000

Note: Any application missing the above information will be returned to the applicant for completion. *Statistics Canada information used as a guideline.*



THE HART OF THE GAME FUND APPLICATION FORM

FUNDING DEADLINE: SEPTEMBER 15

Please read instructions on the reverse side before completing this application.

SECTION A: (Please print) Name and Complete Address of Parent/Guardian

Last Name		First Name	
Street Address	City	Province	Postal Code
Home Telephone No.		Business Telephone No.	

Name of Athlete (s)

Date of Birth & Division

SECTION B: Confidential Financial Information

Number of people Residing in household: No. Adults: _____ No Children: _____

Please complete the following information based on your last income tax return(s) and attach copies of the Notices(s) of Assessment and the Options C printout(s) from Revenue Canada.

	Total Income per line 150
Wage Earner #1 income	\$ _____
Wage Earner #2 income	\$ _____
Child Support Payments Received	\$ _____
TOTAL	\$ _____

SECTION C: Exceptional Circumstances (use separate page if necessary)

SECTION B: Volunteering Information

Are you willing to fundraise to help pay your child's fees?

YES

NO

Please note that the Ralph Pocock Committee may determine what the fundraising requirements will be.

I certify that the information provided on this application and in any documents attached is correct and complete. I also understand that financial and other information provided above is confidential.

Signature

Date



2019-20 Wetaskiwin Minor Hockey Association*

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