

## Step #5

### Adult Endorsement

**Note:** Please read the guidelines before completing this portion of the application.

Your role as an adult endorser is to confirm true financial need on the part of the applicant. You must exercise independent judgement and only endorse those applications which are based on financial need.

**Adult endorsers must be one of the following:**

- a school teacher, principal or community school worker
- a professional in health / social work / family services
- a family lawyer
- a law enforcement officer
- a member of the clergy

#### ADVICE TO THE ENDORSER OF A KIDSPORT™ APPLICATION

Your role is critical to the productive use of KidSport™. As the endorser, you should have a good understanding of the applicant's family financial situation and their inability to pay for registration fees for the above sport. Only endorse those applications that you know are in need.

Name: \_\_\_\_\_

Position: \_\_\_\_\_ Employer: \_\_\_\_\_

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

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

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

How do you know the participant: \_\_\_\_\_

**Is the grant essential in order for this applicant to participate in the sport?**

Yes  No

*I am aware of this family's current situation and recommend they be considered for KidSport™ funding.*

Signature of Endorser: \_\_\_\_\_ Date: \_\_\_\_\_

## Step #6

### Submit Application Form

Applications should be sent to: **Kindersley KidSport™**  
**Box 2530**  
**Kindersley, SK S0L 1S0**  
**Fax: 463-8221**

Application to

# KidSport™

ON BEHALF OF AN INDIVIDUAL PARTICIPANT

So **ALL** Kids  
Can Play!



#### What is KidSport™?

KidSport™ is a children's charity dedicated to assisting children of families facing financial obstacles to participate in community sport programs. The KidSport™ goal is to provide these children with the opportunity to achieve physical, social, intellectual and moral development through participation in sport.

Individual grants of up to \$300 are available to children up to 18 years old. Applications will be screened by local volunteer committees to ensure the financial need and legitimacy of the applicant.

#### Eligibility

- Youth up to the age of 18 inclusive are considered for financial support.
- Applications must be submitted before the start date of the activity.
- Priority will be given to subsidization of participation/registration fees.
- Preference is given to participants who are being introduced into a sustained organized sport led by a qualified coach/instructor. **Costs related to dance, camps, travel, championships, high performance, etc. do not qualify.**
- Activities must be considered "sport". For an updated list of these sports please visit [www.sasksport.sk.ca/kidsport/finance.html](http://www.sasksport.sk.ca/kidsport/finance.html).

#### Grant Criteria

- A participant may not receive more than \$300 in a calendar year.
- Availability of funding is limited.
- KidSport™ will allocate funds throughout the calendar year.

#### Approval

- KidSport™ issues funds directly to a league, association or school on behalf of the participant.
- Allow approximately 30 days for notification of application status.
- Incomplete application forms will be sent back to the applicant for completion. Once completed, the applicant must then re-apply.
- Any unused funds must be returned to KidSport™

#### Confidentiality

- **All information provided is kept in the strictest confidence.**
- The information contained on this application form is used solely for the purpose of adjudicating the grant request. Personal information shall not be used or disclosed for purposes other than that for which it was collected.

## Step #1

### Participant Information

Please print clearly.

Participant Name: \_\_\_\_\_

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

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

Birthdate (m/d/y): \_\_\_\_\_ Age: \_\_\_\_\_  Male  Female

Is this the first time participating in this sport? [ ] Yes [ ] No

If no, how many years has he/she been involved? \_\_\_\_\_

## Step #2

### Parent / Guardian Information

All information provided is kept in the strictest confidence.

Parent/Guardian: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Please check all that apply: [ ] Single Parent Family

[ ] Dual Parent Family [ ] Foster Parent other: \_\_\_\_\_

Number of children in the family under 19: \_\_\_\_\_

Check the amount that best indicates the combined gross annual income of the applicant's parents/guardians: [ ] below \$10,000/yr [ ] \$10,000 - \$20,000/yr [ ] \$20,000 - \$30,000/yr [ ] \$30,000 - \$40,000/yr [ ] over \$40,000/yr

Have you applied for funding assistance from any other source?  Yes  No  
If yes, please explain: \_\_\_\_\_

Have you received KidSport™ funding in the past?  Yes  No  
If yes, when? \_\_\_\_\_ How much? \_\_\_\_\_ For which sports? \_\_\_\_\_

Please outline why you need financial assistance under this program. KidSport™ may contact you for further information. Please attach additional page if more space is required. \_\_\_\_\_

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

## Step #3

### Amount of Support Requested

*Each child may apply for up to \$300 per year.*

*Preference will be given to participation/registration fees, although equipment may be considered.*

Registration/Participation fees: \$ \_\_\_\_\_

Equipment cost: \$ \_\_\_\_\_

Other costs (i.e. rink fee, etc): \$ \_\_\_\_\_

Less option for fundraising: \$ ( \_\_\_\_\_ )

Total amount requested: \$ \_\_\_\_\_ (max of \$300)

Equipment needed and size (if applicable):

\_\_\_\_\_  
\_\_\_\_\_

## Step #4

### Identify the Sport Activity

*If funds are approved for the participant, a cheque will be issued directly to the contact listed below. All unused funds must be returned to KidSport™.*

Sport: \_\_\_\_\_

What are the dates for this sport activity:

Start: \_\_\_\_\_ Finish: \_\_\_\_\_

Name of League/Association/School that cheque is payable to:

\_\_\_\_\_

Secretary/Treasurer of League: \_\_\_\_\_

Day Time Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Mailing address: \_\_\_\_\_

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