



2013 Application for Financial Assistance

- All blanks in Steps 1, 2, 3, and 4 are filled in and complete.
- Proof of family income is attached as requested by Funding Policies A and B on page 2 of this application. **Applications will not be processed without required supporting documents.**
- Please apply for sessions starting between deadlines at the earlier deadline.
- Deadlines are the 15th of each month.

Administered by
Sport
MANITOBA

Corporate Sponsor
THE
Great-West Life
ASSURANCE COMPANY

STRONGER COMMUNITIES TOGETHER™

WHERE DO I MAIL OR FAX THE FORM?

Winnipeg

145 Pacific Ave, Winnipeg MB R3B 2Z6, 204-925-5922 (Fax) – 204-925-5638

Rural Manitoba

Rm. 335, 340 – 9th St. Brandon MB R7A 6C2, 204-726-6072 (Fax) – 204-726-6583

**If you need assistance completing this form,
please contact your Regional Office.**

Central Region

204-822-6735 or central@sportmanitoba.ca

Eastman Region

204-268-2172 or Eastman@sportmanitoba.ca

Interlake Region

204-642-6015 or interlake@sportmanitoba.ca

Norman Region

204-778-3109 or norman@sportmanitoba.ca

Parkland Region

204-622-2094 or parkland@sportmanitoba.ca

Westman Region

204-726-6072 or westman@sportmanitoba.ca

Winnipeg Region

204-925-5922 or kswinnipeg@sportmanitoba.ca

QUESTIONS?

Call KidSport Toll Free at 1-866-774-2220

Application to the KidSport™ Fund for Financial Assistance

STEP 1 CHILD INFORMATION

Child's Last Name: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Male Female Age _____ Birth Date: Year _____ Month _____ Day _____

Number of Dependent Children in Family (Age 18 and Under): _____

Has this Child Ever Received KidSport™ Funding Assistance Before? Yes No If YES when? _____

Sport Child will be Participating in: _____ Number of Years in Sport: _____

Registration Fee: \$ _____ Minus Portion Family Will Pay: \$ _____ = **Total Funding Request:** \$ _____

I authorize KidSport and the Sport Organization to discuss the status of this application.

Parent/Sponsor/Guardian Signature _____ Date : _____

STEP 2 PARENT / SPONSOR / GUARDIAN INFORMATION

Note: The parent/guardian/sponsor will act as the contact person for the child & will receive all correspondence.

Last Name: _____ First Name: _____

Address (if different from Child's): _____ Postal Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

E-mail: _____ Fax: _____

Relationship to Child (i.e. Parent/Sponsor/Guardian/other): _____

Please check one: Single Parent Married Common-Law

Do any of the following apply to your family? Social Assistance Foster Parent

STEP 3 SPORT INFORMATION

***Please take this form to the Sport Organization/Club for completion.*

Sport Organization/Club: _____

Cheque to be Made Payable to: _____

Mailing Address: _____ Postal Code: _____

Contact: _____ Position: _____

Email: _____

Sport Organization Signature: _____ Telephone: _____

Sport Registration Fee: \$ _____ (**not** including fundraising bonds, canteen bonds, pictures etc.)

Program Dates: (Start) _____ (End) _____

STEP 4 FINANCIAL INFORMATION

I have provided the following supporting documents: *(please check all boxes that apply)*

- Canada Customs and Revenue Agency NOTICE OF ASSESSMENT (NOA) *(See Funding Policy 'A')*
(If married or common-law, you must include both partners' Notice of Assessments or the application will be considered incomplete)
- Proof of Social Assistance Status *(See Funding Policy 'B')*
- Proof of Foster Parent Status *(See Funding Policy 'B')*
- Other Income: _____

The Notice of Assessment(s) provided accurately reflects my current financial situation. Yes No
If NO, provide a letter explaining and provide proof of your current financial situation (i.e.: pay stubs).

SPORT MANITOBA OFFICE USE ONLY:

Total Household Income \$ _____

FUNDING POLICIES

- A) A copy of Canada Customs and Revenue Agency Notice of Assessment (NOA) must be provided. **Applications will not be processed without proof of income and additional financial information may be requested.** If you do not have your most recent Canada Customs and Revenue Agency Notice of Assessment, contact Revenue Canada at 1-800-959-8281.
- B) If you are a Foster Parent for the child applying, or on Social Assistance, please provide proof of Foster Parent Status or Social Assistance Status.
- C) Financial assistance to individual athletes is designed to help children ages 18 and under who would not play a sport without KidSport™. Preference is given to children being introduced to a sport.
- D) Financial assistance is disbursed up to a maximum of \$300 in a calendar year per athlete.
- E) Sport activities must be affiliated with organizations recognized by Sport Manitoba.
- F) Costs relating to camps, travel, championships, uniforms, etc. do not qualify.
- G) Funding cheques are sent directly to Sport Organizations/Club.
- H) To view the low income cutoff levels used by KidSport™ Manitoba, please visit:
http://www.kidsportcanada.ca/index.php?page=manitoba_how_to_apply

Applications must be complete and received in the Regional Office by the deadline to be considered. If you need assistance completing this form please contact your Regional Office.

ALL INFORMATION PROVIDED IN THIS APPLICATION WILL BE RETAINED BY KIDSPORT AND SHALL NOT BE RELEASED TO ANY OTHER PARTY WITHOUT THE EXPRESS WRITTEN CONSENT OF THE APPLICANT.