

## Section 1: Athlete Recipient

All five sections of the Application must be filled out completely where applicable. Required fields are indicated by an asterisk. Although this form does allow it to be saved for completion at a later time we recommend you have as much of the required information available before beginning.

### Athlete Information \*

First Name

Initial Last Name

Male  Female

### Address \*

### City and Postal Code \*

### Birth Date: Month/Date/Year (Example: January 1, 1995) \*

### Area Code and telephone (Example: 250-123-4567) \*

Is this participant of Aboriginal ancestry—including First Nations, Métis, Inuit?

Yes  No

Special Olympics

Yes  No

Child with a disability?

Yes  No

Are you a family new to Canada (resided in Canada 10 years or less)

Yes  No

Sport activity for which the grant will be used: \*

Victoria Volleyball Association

Has the applicant received a KidSport grant before?

Yes  No

Start and end date of sport season: (Example: January 1, 2012 to March 1, 2012) \*

Jan 1, 2017 to May 31, 2017

Advertised Registration Cost \*

\$400

Grant amount Request (Registration fees only. Excludes uniforms and fundraising fees.

Request can't exceed \$400) \*

Section 2: Specify who we make the payment to.

Important. This determines who we make the payment to. Fill out either Option One (Sport Organization) OR Option Two (School). DO NOT fill in both.

Option One: Sport Organization

Sport Organization

Victoria Volleyball Association

Address

1941 Taylor St

City and Postal Code

Victoria, BC V8R 3G5

Phone

(250) 360-0383

Contact at Sport Organization

Allan

Carmichael

First Name

Last Name

**Position**

Treasurer

**Email**

treasurer@victoriavolleyball.ca

**Name of the Provincial Sport Organization that the club is a member in good standing of. This determines eligibility for funding.**

Volleyball BC

**Option Two: School**

**School District**

#61  #62  #63

**School Name**

**School Mailing Address**

**City and Postal Code**

**City and Postal Code**

**Phone**

**Section 3: Parent / Guardian / Adult Sponsor**

**Name of Parent/Adult Sponsor \***

First Name

Last Name

**Address (if different from athlete as above)**

City and Postal Code (if different from athlete as above)

Parent/Guardian/Adult Sponsor Email \*

NOTE: I agree to allow KidSport to contact me via the email address above

I agree

Area Code and telephone (Example: 250-123-4567) (if different from athlete as above)

Relationship to athlete \*

Please check the number that applies to your household. CHECK ONE BOX ONLY. \*

Two person household  Three person household  Four person household  Five person household  Six person household  Seven person household

Please check the box that is closest to your combined annual family income. CHECK ONE BOX ONLY. \*

\$24,353  \$31,168  \$37,843  \$42,920  \$48,408  \$53,894

These figures are determined by Statistics Canada


By checking this box you are legally signing this form and certifying it's contents to be true. \*

I Agree

Date of this application: Month/Date/Year (Example: January 1, 2012) \*

## Section 4: Grant Distribution

KidSport will issue the cheque payable to the sport organization, school district or adult sponsor ONLY. Please ensure you choose one ONLY. Please ensure the mailing address and contact information of the sport organization or the school are correct.

**Please make the KidSport cheque payable to (check one box only):** 

Sport Organization (KidSport prefers to issue the funds to recognized sport organizations.

Please ensure mailing address is correct.)

School District

Adult Sponsor (a receipt or cancelled cheque for payment of registration fees must be included here). Upload a copy of the receipt or cancelled cheque below.

**Upload the copy of the receipt here.**

no file selected

**Section 5: Information Verification. You have two options. A) Provide a Reference as described below or B) Scan and upload the first page of your CRA return showing your family income.**

The Reference is the most important step in the KidSport™ application process and acts as an objective third party who is familiar with the athlete's family. They will be in a professional position to confirm the social and economic barriers facing the family.

- A Reference can be a professional in social work or family services, a school principal or counsellor, a senior recreation administrator, lawyer, accountant, law enforcement officer, or a registered physician
- References, other than those listed, may be considered if a written letter from the potential Reference outlining the financial need of the family is included with the application
- Family members, coaches, registrars or directors of clubs/leagues are NOT accepted as References
- Please contact your reference to ensure the email address you are providing is correct. We may ask the reference to confirm your information.
- Randomly selected applicants will be contacted and asked to provide proof of total income from the previous year's income tax filing.

## **A) Reference Option**

**Reference / Adjudicator \***

First Name

Last Name

**Reference Profession \***

Reference Email \*

Reference's Organization of Employment \*

Reference Phone \*

## B) Scan your CRA return

Click "browse" to upload a scan of your CRA return.

no file selected

[Save and Resume Later](#)