

Deadlines  
Spring / Summer  
May 15th



Deadlines  
Fall / Winter  
October 15th

**SECTION 1: APPLICATION INFORMATION**

Name: \_\_\_\_\_ Birth Date (dd/mm/yy) \_\_\_\_\_  
Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code \_\_\_\_\_  
Tel ( ) \_\_\_\_\_ email: \_\_\_\_\_

**SECTION 2: REQUEST FOR FUNDING \*please ensure all information is complete**

I would like to request funding for

\*Sport or Activity – Organization Name: \_\_\_\_\_  
\*Registration Fees \_\_\_\_\_ \$ \_\_\_\_\_ Max \$300  
\*Organization Contact: \_\_\_\_\_  
\*Tel: ( ) \_\_\_\_\_ \*Address: \_\_\_\_\_ \*City: \_\_\_\_\_  
\*Prov \_\_\_\_\_ \*Postal Code \_\_\_\_\_ \*email address \_\_\_\_\_  
\*Please indicate sport or recreation activity start date: \_\_\_\_\_ Number of weeks: \_\_\_\_\_

**SECTION 3: ENDORSEMENT**

1. Parent / Guardian / Councillor

Please indicate relationship to applicant \_\_\_\_\_

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

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

Tel ( ) \_\_\_\_\_ \*email \_\_\_\_\_

\* Permission for Jump Start to contact you directly: circle yes / no

*I certify my submission of the above child/youth and verify that all the information given is correct and can be substantiated*

Signature of Adult: \_\_\_\_\_ Date: \_\_\_\_\_

2. Community Leader / Professional

Please attach a letter from a Community leader indicating relationship to applicant and a verification of the applicant's economic barrier to participate in requested activity or program. The community Leader should be in a position to identify and assess the economic barrier of the applicant.

Organization: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_

Tel ( ) \_\_\_\_\_ email \_\_\_\_\_

**Drop off at Uxpool; JumpStart and its members will respect the confidentiality of all applicants**

