

Application - National Championship Travel Subsidy



Section 1: General Information

What is the name of the Provincial Sport Organization applying for funding?

--

What is the permanent mailing address of the group or organization seeking funding?

Street/P.O. Box:	Town/City:
Province:	Postal code:
PSO President:	
PSO email:	Telephone:
Head coach:	
Email:	Telephone:

Section 2: National Championship Information

Team name:	Age range of athletes:	
Number of female athletes:	Number of male athletes:	
Name of National Championship:		
Location:	Date(s):	
Is this the NSO sanctioned National Championship for this age group?	Yes	No

Section 3: Financial Information

Expenses: Please complete based on ONE athlete only

Air fare:	
Car/bus/van rental:	
Accommodations:	
Meals:	
Other (explain):	

Revenue: Please complete based on ONE athlete only

National Sport Organization:	
Provincial Sport Organization:	

Application - National Championship Travel Subsidy

Sponsorship(s): Sponsor name?	
Other: (do not include fundraising or player/parent contribution) Explain:	

Section 4: Checklist

IMPORTANT: Please review your application and be sure that all required information has been provided.

Reviewed the program guidelines.

Completed all sections of the grant application.

Attached the names, email addresses, mailing addresses (including postal codes) of the athletes, coaches and managers who will be travelling with the team.

Attached written confirmation that individual athletes have successfully achieved the standards established by the NSO, if applicable.

Section 5: Conditions and Privacy Notice

The personal information in this form is being collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015, for the purpose of program administration and assessing the merits of each funding application. Please note that the information you provide can be subject to an Access to Information request. If you have any questions about the collection, use and disclosure of your personal information, please contact the Access and Privacy Coordinator, Department Children, Seniors and Social Development at 709.729.6370.

Section 6: Authorization

I certify that, to the best of my knowledge, the information provided in this grant application is accurate, complete and is endorsed by the organization/group that I represent, and that I am authorized to enter into funding agreements on behalf of my organization/group. I certify that my organization/group meets the basic eligibility criteria of the Sport Championship Hosting Program Guidelines. I also certify that if successful for funding my organization/group will abide by all terms and conditions herein which will form the Agreement between the Parties.

Application - National Championship Travel Subsidy

President (please print):

Signature

Date

*If application is emailed, this satisfies the signature requirement

Head Coach (please print):

Signature

Date

*If application is emailed, this satisfies the signature requirement

APPLICATION DEADLINE:
Applications must be received
one month prior to the
start of the event.

PLEASE SUBMIT TO:
Billy Taggart
Sport Consultant
billtaggart@gov.nl.ca
709.729.6291