



2011 – 2012 Bursary Committee Grant Application

Submit Separate Form for Each Skater – use back or additional documentation as necessary. **PLEASE PRINT LEGIBLY**

Date Submitted: _____ Application received by: Nov.15/11 & Feb.15/12

Name: _____ Age: _____

Mailing Address: _____

Home Club: _____ Skate Canada #: _____ # of years a Skate Canada Member _____

** Please complete entire form – circle or fill in blanks as required.
DO NOT include OFF SEASON expenses **

Highest Test Level Achieved
Badge _____ Skills _____
Freeskate _____ Dance _____
Competitive _____ S / D / P

Winter Season Registration \$ _____
of days skating per week _____
Monthly Coaching Costs \$ _____
Additional Ice Costs \$ _____

Competitions Entered Last Season / Placing

Other Funding Applied Received:
Club Yes / No
Region Yes / No
Skate Canada Yes / No
Corporate / Private Yes / No

CanSkate OR STARSkate Skater (Circle one if applicable)

Competitive Skater - Yes / No
Synchronized Skater - Yes / No
Program Assistant - Yes / No # hrs. / week _____

Club Assistance (bingo, program assistant or other skating credits) Yes / No

If successful with the Bursary application, where would the funding be used:

Skating Debts: Club - \$ _____
Coach - \$ _____
Other - \$ _____

Post-Dated Skating Debt Payments - Yes/No \$ _____
Have you applied to the Bursary before: Yes / No
Year _____

Skater's Goals:

Parent's Occupation & Employers:

Brief Family Profile:

Club Executive Member Comments (list skater / family volunteer skating involvement):
(This Section must be completed for application to be considered.)

Parent/Guardian
Signature: _____
Phone: () _____

Club Executive Member
Signature: _____
Phone: () _____

All cheques will be made payable to the Home Club and the named applicant
Mail or Fax to: Skate Canada - Western Ontario – Attention: Bursary Committee
237 Consortium Court LONDON, ON N6E 2S8
Phone 519-686-0431 or Fax 519-686-0593

PRIVATE & CONFIDENTIAL - FOR BURSARY COMMITTEE USE ONLY