



athletics for kids

APPLICATION

Application to be completed in full. All information will be treated confidentially.

ATHLETE

Name _____ Age _____ DOB _____

Address _____

City _____ Postal Code _____ Telephone _____

Name of Parent or Guardian _____

Address / Telephone (if different than above) _____

Details of sport program for which the funding is requested: _____

Estimated cost of program: _____ Where Did You Hear About A4K _____

Signature of Parent/Guardian _____ Date _____

SPORT ORGANIZATION (Club/League) _____

Address _____ City _____ Postal Code _____

President _____ Contact telephone no _____

SPONSOR (social worker; school principal; church leader (Rabbi, Minister or Priest); law enforcement officer, doctor, dentist)

Name _____ Position/Occupation _____

Address _____ Telephone _____

I have reviewed the requirements to determine that the applicant and his/her family qualifies as being financially needy in accordance with the A4K policy attached. I have also reviewed appropriate documentation related to the applicant or his/her family as described on the attached policy to verify this status. I am willing to participate in a conversation with a director of A4K to verify the applicant's financial status.

Signature _____ Date _____

Return applications to: A4K, Suite #134, 1489 Marine Drive, West Vancouver, B.C. V7T 1B8

A4K

It's not the obstacles we face, but the challenges we share.



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Without exception, funds will be issued to the sport organization named for the program requested.

Requirements to Determine Whether Applicant and His/Her Family Are Needy

In order for A4K to qualify as a registered charity, all beneficiaries of funding must meet very strict requirements. As such, in order to meet these requirements, all individuals must be classified as "needy" or "poor". Further, the use of funds must be for the purpose of paying for services related to entry level athletics, such as annual membership fees. Funds cannot be used for the purchase of athletic equipment.

Please ensure that the applicant and his family meet the requirements of being "needy" or "poor" by ensuring that they meet **one of the following** financial requirements:

- At least one parent or guardian is receiving social assistance (please attach proof);
- The taxable income of the primary caregiver is equal to or less than \$40,000 per year;
(a copy of prior year's income tax assessment notice. Your filed return or T4 slip are not acceptable)
- The applicant is receiving social assistance (please attach proof);
- The applicant is in a foster care program (please provide Ministry contact).

Please tick the appropriate requirement that has been met.

In order to attest that the applicant meets the above requirements, please review one or more of the following documents to attest to this fact:

1. Documents from appropriate government agency to verify that the applicant or his/her family receives social assistance or is in a foster care program;
2. Prior year income tax return.

A4K

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