

#  “GYMNASTS FIRST”

# GRANT PROGRAM 2018-2019

Gymnastics Saskatchewan has established a grant funding program to assist competitive gymnasts of families facing financial obstacles to participate in gymnastics at provincial, national and high performance levels. The goal of the “Gymnasts First” program is to provide these children and families with increased opportunities to achieve their goals and dreams to help reach their fullest potential, and to provide financial support to assist them in their goal of competing in Saskatchewan and Canadian championships.

Individual grants of varying amounts, depending on need, are available for gymnasts aged 21 and under.

**ELIGIBILITY**

**Families with a maximum combined family gross income of under $60,000 are eligible to be considered for financial support.**

**Gymnasts must be 21 years of age and under, and registered members with a club in good standing with Gymnastics Saskatchewan as National Stream or Provincial Stream athletes.**

**GRANT CRITERIA**

Applications will be screened to ensure financial need and legitimacy of the applicant.

Funding amounts will be based on:

* Number of applicants and availability of grant money;
* Combined family income under the threshold of $60,000 annually;
* Income verification as determined by 2017 CRA Notice of Assessment;
* Annual club fees:
* Competitive level of the gymnast – athletes competing at the highest level will take priority; (only Provincial and National level athlete will be considered for support)
* Estimated annual competition/travel costs for the level of the athlete as determined by Gymnastics Saskatchewan.

**ALLOWABLE EXPENDITURES**

Funding may be used for the following expenditures:

* Club training fees/coaching fees
	+ Travel costs to competitions and/or training camps
	+ Purchase of uniforms and personal equipment

**APPLICATIONS AND APPROVAL**

Confidential applications will be accepted once annually – deadline for applications is November 1st each year.

Applications must be completed in full. **A copy of the most recent Revenue Canada Notice of Assessment from both parents, if applicable, must be submitted.**

Gymnastics Saskatchewan will issue funds directly to the gymnast/family, or to the gymnast’s home club if requested.

Actual receipts in the amount of the approved grant and a follow up report must be provided prior to grant money being released.

**CONFIDENTIALITY**

All information provided will be kept in the strictest confidence.

The information collected on the applications will be used solely for the purpose of adjudicating the grant request. Personal information shall not be used or disclosed for purposes other than that for which it was collected.

**GYMNASTS FIRST GRANT APPLICATION**

**Deadline November 1, 2018**

**STEP 1 PARTICIPANT INFORMATION**

Gymnast’s Full Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_ P.Code:\_\_\_\_\_

Age and Birthdate:\_\_\_\_\_\_\_\_\_\_\_ Male/Female \_\_\_\_\_\_\_\_\_\_\_

Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level of Competition in 2018/2019: \_\_\_\_\_\_\_\_\_\_\_(please verify with your coach)

Training Hours Per Week \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STEP 2 PARENT/GUARDIAN INFORMATION**

\_\_Single Parent Family \_\_Dual Parent Family \_\_Foster Family \_\_Other

Mother’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Full-time/Part-time\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Full-time/Part-time\_\_\_\_\_\_\_\_\_\_\_

Telephone: home \_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 work \_\_\_\_\_\_\_\_

 cell \_\_\_\_\_\_\_\_

Number of children at home under age 19: \_\_\_\_\_

Please state your annual gross **combined** family income as shown on the 2017 Notice of Assessment(s). Copies must be attached.

Mother $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a one parent family, please indicate actual monthly or annual financial support received from the other parent for gymnastic costs.

$ \_\_\_\_\_\_\_\_\_\_

Please outline/describe why you need financial assistance under this program. Gymnastics Saskatchewan may contact you for more information. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STEP 3 GYMNASTICS EXPENSES**

Please outline your projected gymnastics expenses for the year **September 1, 2018 to August 31, 2019:**

Annual club fees less fundraising commitment $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Competition costs (entries, travel, etc.) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Uniforms and personal equipment $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fundraising commitment amount $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you pay this FR amount or work it off? Pay \_\_\_ Volunteer \_\_\_\_ (see below)

**Please describe fundraising and volunteer initiatives you undertake to assist with the costs of gymnastics expenses:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant /Parent/Guardian Date

**STEP 4 SUBMIT APPLICATION**

Applications should be mailed or faxed in confidence, by November 1st to:

Klara Kesmarky Miller, CEO

Gymnastics Saskatchewan

300 – 1734 Elphinstone Street

Regina, SK S4T 1K1

Fax: 306-780-9475

Email: kmiller@gymsask.com