

CONFIDENTIAL

**2020-2021 CLUB EMERGENCY ASSISTANCE PROGRAM (EAP)
APPLICATION FORM**



We are applying for:

Category #1 _____ Re-open before August 30, 2020

Category #2 _____ Re-open September 1, 2020 or after

CLUB NAME	
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CONTACT PERSON		EMAIL ADDRESS	
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MAILING ADDRESS		PHONE	
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What type of facility are you in?

_____ Permanent (year-round) facility

_____ Rent seasonal space (community facility)

Our club offers programs:

_____ Year-round – fall, winter, spring, summer

_____ Fall, winter, spring

_____ 1-2 sessions only a year

_____ Other (Please specify)

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Our club offers programs for:

_____ Recreational

_____ Active Start

_____ Performance/Gymnaestrada

_____ Inter-club and/or Competitive WAG

_____ Inter-club and/or Competitive MAG

_____ Inter-club and/or Competitive TG

_____ Inter-club and/or Competitive RG

_____ Inter-club and/or Competitive Acro

_____ Birthday Parties

_____ Summer Camps

_____ Outside User Groups (schools, daycares, sport cross training, etc.)

_____ Other, please describe

Coaching & staff numbers:

	Pre-Covid number of employees	Current number of employees	Re-hiring plan?
Full Time			
Part Time			

Please indicate which provincial & federal funding support measures you applied for and/or received:

	Yes & approved	Not yet, will apply	No	Not eligible
Canada Emergency Wage Subsidy (10%)				
Canada Emergency Wage Subsidy (75%)				
Business Credit Availability Program				
Saskatchewan Small Business Emergency Payment				
Canada Emergency Commercial Rent Assistance				
Gym Sask MAP Grant				
Gym Sask HP Coach Grant				
Other (please specify)				

Our club would like to apply for Gym Sask EAP financial assistance – total amount and details as follows:

Total EAP Amount Requested	\$
BREAKDOWN	
1) Staffing/Coaching	\$
2) Facility rental/lease/mortgage	\$
3) Covid related ongoing costs for PPE, cleaning, sanitizing, equipment, signage, other	\$
4) Promotions and marketing costs	\$
5) Program development costs	\$
6) Other	\$

Please provide a detailed description of the above spending plan for Gym Sask EAP funding. This description will be used by an adjudication panel to assess your funding needs.

Please attach for our committee's review:

- Financial statements from the previous year and for the current period as of the date of application, for comparison to demonstrate financial need – a decline in revenues and/or membership numbers. Note that financial information will be held in confidence.

Be reminded that Gym Sask EAP funding cannot be used to duplicate revenues already received from other sources (federal, provincial, municipal, MAP or other Gym Sask grants). Clubs must be able to provide unique receipts for costs not already covered by other sources. Follow-up reports for Gym Sask EAP will require clubs to report full disclosure as to funding from other sources.

I hereby certify this information is correct and factual.

Signature, Club President/Head Coach/Owner

Gymnastics Saskatchewan Use Only		
Amount Approved	Authorized By	Date



**GYMNASTICS
SASKATCHEWAN**