



ATHLETE ASSISTANCE APPLICATION FORM

DEADLINE TO APPLY IS OCTOBER 31, 2019

A. IDENTIFICATION

Name: _____ Date: _____

Address: _____ Postal Code: _____

City/Town: _____ Phone: _____

E-mail: _____

Baseball Sask Active Member Club Team Registered with in 2019: _____

I played on the following Baseball Sask Team (Check One):

Canada Games Western Canada Games Canada Cup Tournament 12

What year did you play on the team (s) above: _____

B. STUDENT DECLARATION

I will be attending the following: Post Secondary _____ Secondary _____

Institution Name: _____

Dates Attending: _____

Course of Study: _____

Registered as: Full Time _____ Part Time _____ in 2019 / 2020

Please state course load: _____

I am in receipt of the following bursaries/scholarships for the 2019/2020 Academic Year:

Granting Institution	Type of Aid	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. TRAINING & COMPETITION COSTS

Training Costs	Amount
_____	_____
_____	_____
_____	_____

Competition Costs	Amount
_____	_____
_____	_____
_____	_____

Other Costs (i.e. tuition fees, etc.)	Amount
_____	_____
_____	_____
_____	_____

D. ATHLETE DECLARATION

I hereby declare that the above information to be the best of my knowledge is true and complete and in return for any assistance provided under the Athlete Assistance Program, I will undertake to fulfill training and competition expectations as outlined by my Provincial Sport Governing Body.

_____	_____
Applicant's Signature	Date

**SUBMIT APPLICATION TO PROVINCIAL
HEAD OFFICE:**

**BASEBALL SASK
300-1734 ELPHINSTONE STREET
REGINA, SK
S4T 1K1**

mike@baseballsask.ca