



**SASK SPORT**

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# COVID-19 EMERGENCY SUPPORT FUND FOR SPORT ORGANIZATION ATTESTATION AND APPLICATION – MEMBERS OF PSOs

To be completed by the person authorized to sign on behalf of the **PSO/MSO member**.

<b>PSO/MSO Member Name:</b> (e.g. club/team/league)	
<b>Authorized Individual:</b>	

As the person authorized to sign on behalf of the PSO/MSO member:

I attest that our organization has **not** been negatively impacted by COVID-19, and will not be applying for these funds. **If checked, please sign form and submit.**

I attest that our organization has been negatively impacted by COVID-19, which has resulted in financial hardship and is therefore in need of government funding.

**If checked, please complete the remainder of the form for submission.**

## TABLE A

Please indicate if provincial & federal funding support has been applied for, plan to apply for and/or received by your organization.

Programs	Applied for		Plan to Apply for		Received	
Canada Emergency Wage Subsidy (10%)	Yes	No	Yes	No	Yes	No
Canada Emergency Wage Subsidy (75%)	Yes	No	Yes	No	Yes	No
Business Credit Availability Program	Yes	No	Yes	No	Yes	No
Saskatchewan Small Business Emergency Payment	Yes	No	Yes	No	Yes	No
Canada Emergency Commercial Rent Assistance	Yes	No	Yes	No	Yes	No
Other (please specify) e.g. NSO	Yes	No	Yes	No	Yes	No

**Comments:**

**Our organization would like to apply for the COVID-19 Emergency Support Fund for Sport Organizations as follows:**

**TABLE B**

**Please identify any actual and/or projected losses or costs directly as a result of COVID-19 that will not be covered by other sources of revenue including Sask Lotteries Trust Fund grants.**

<b>IMPACT DUE TO COVID-19 (Actual/Projected Losses or Costs)</b>	<b>PSO/MSO</b>
Revenue losses (e.g. membership fees)	\$
Staffing/Coaching	\$
Facilities (e.g. operations, rental, maintenance)	\$
COVID related costs (e.g. PPE, cleaning, sanitizing, equipment, signage, waivers, etc.)	\$
Promotions and marketing	\$
Program costs	\$
Other (list):	\$
Other (list):	\$
Other (list):	\$
Other (list):	\$
Other (list):	\$
<b>TOTAL IMPACT DUE TO COVID-19</b>	\$

<b>TOTAL AMOUNT REQUESTED</b>	\$
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**Please provide a detailed description on the financial impact COVID-19 has had on your organization.**

**Our organization agrees:**

- The funds are not to be used to cover expenditures already funded under any other government COVID-19 emergency measures, including but not limited to the Canada Emergency Response Benefit, the Canada Emergency Wage Subsidy, the Canada Emergency Business Account, and the Canada Emergency Commercial Rent Assistance for small businesses.
- All funding received from other government emergency or additional funding sources to address COVID-19 must be declared/identified (Table A).
- Funding from the Sask Lotteries Trust Fund is to be utilized before COVID-19 Emergency Support funds. (i.e. MAP).
- The funding and expenditures are for the period of April 1, 2020 to March 31, 2021.
- Multiple revenue/grant sources cannot be used for the same dollar of expense. E.g. Source 1 = \$500, Source 2 = \$500 and Source 3 = \$500; there must be a minimum of \$1500 in expenses.
- Your organization will make every effort to remain operational; the funding provided will help ensure a continuity of operations, enabling your organization to continue contributing to the sector in the future.
- Recipients of these funds must recognize the Government of Canada for the support.
- That we will be required to do a follow-up report including receipts on the impact attested to in this Attestation and Application.

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PSO/MSO Member Signing Authority

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Date