

ATHLETE ASSISTANCE APPLICATION FORM

DEADLINE TO APPLY IS OCTOBER 31, 2025

A. IDENTIFICATION		
Name:	Date	::
Address:	Post	al Code:
City/Town:	Phor	ne:
E-mail:		
Baseball Sask <u>Active Member Club</u>	Team Registered in 2	025:
I played on the following Baseball	Sask Team (Check One	e):
Canada GamesC	anada Cup Bl	ue Jays Futures Showcase
What year did you play on the tea	m (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 2025/2026
Please state course load:		
I am in receipt of the following bu Granting Institution	-	
Granting institution	Type of Aid	Amount
	_	
		

С.	TRAINING & COMPETITION COSTS	
Trair	ning Costs	Amount
Com	petition Costs	Amount
Othe	er Costs (i.e. tuition fees, etc.)	Amount
D.	ATHLETE DECLARATION	
com Prog	reby declare that the above information to be the best of my plete and in return for any assistance provided under the gram, I will undertake to fulfill training and competition expended and competition expended and sport Governing Body.	he Athlete Assistance
	Applicant's Signature Date	

SUBMIT APPLICATION TO PROVINCIAL HEAD OFFICE:

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

mike@baseballsask.ca