

Guidelines

Contact us for more info

KidSport NL

1296A Kenmount Road Paradise, NL A1L 1N3

T: 709-576-4979

F: 709-579-7493

www.kidsportcanada.ca/nl

KidSport NL is provincally operated by:



www.sportnl.ca facebook.com/sportnl

Twitter: @sportnl

Guideline Info

- 1. Applicants must be aged 18 or younger.
- **2.** Grants are awarded for registration fees and equipment costs only.
- 3. Total grant will not exceed \$400.
 *Amount approved may be less than requested.
- **4.** Recipients must be a resident of Newfoundland and Labrador.
- **5.** KidSport NL will accept applications for sport equipment only. However, proof of paid regisration is required.
 - **6.** Sport organizations must be a member of Sport Newfoundland and Labrador. To view members, visit: http://www.sportnl.ca/findasport
 - **7.** KidSport NL uses Statistics Canada Low Income Cut-offs as a guideline for application approval.
 - **8.** A letter showing your application status will be sent by e-mail. Please allow 4-6 weeks for processing.
 - 9. Incomplete applications will not be processed.*Proof of family income must accompany all applications.
 - **10.** Each child can apply once per year to ensure our funding reaches the maximum number of kids looking to participate in sport.
 - 11. Priority is given to applications received prior to the start of a sport registration deadline for the sport activity. Programs must be at least 8 weeks in duration and applications will not be considered if program is within 6 weeks of completion.
 - 12. Applications must be sent to KidSportNL:

Sport Newfoundland and Labrador
1296A Kenmount Road
Paradise, NL A1L 1N3
Contact Person: Stephanie Abbott-Trahey
Email: sabbott-trahey@sportnl.ca
Fax: 709-576-7493

Phone: 709-576-4932





Application Info

Stephanie Abbot-Trahey

709-576-4979

SportNL Office 709-576-4932

	Control Kid (polit
Office use only	Application Approved: Yes No
Date received:	Amount of Grant:
	Approved by:
Application Form (to be completed by a	adult)
PARENT/GUARDIAN INFORMATION	
Parent/Guardian	
	Postal Code
Telephone —	Email
Choose One: Single Parent Married Common Law Other	
Number of children 18 or under in the family	
Are you currently recieving: \square Provincial Income Support \square Employment Insurance (EI) \square Other	
Yes, I have read the guidelines Signature of Parent/Guardian	
APPLICANT INFORMATION	
Child's Name	Date of Birth
Gender: Male Female	
Full mailing address	
Telephone	Email
Has this athlete recived previous KidSport Funding? ☐ Yes ☐ No	
If applying for funding from another source, please state the name:	
Grant Request: Expenses the grant will be use Registration/Participation Fees \$ _	
Equipment Request \$ _	(List items below)
Equipment needed:	Program start/end date:
Name of league, association, or club:	
Full mailing address:	
Telephone number:	Email Address:
1-800-959-8281 to have one sent by n	evenue Agency (If you do not have a copy please call nail).
http://www.aes.gov.nl.ca/department	f Advanced Education and Skills. For office locations visit t/contact.html#RegionalServices
C. \square Provide a cheque stub of your family's most recent Income Support Payment	
*If self employed, please provide:	
Name of Business:	
Reference (Name, Number, Relationship):	SIGNATURE HERE