

ATHLETE FUNDING APPLICATION



Alberta Racquetball Association

#520, 919 Centre St NW
Calgary, AB, T2E 2P6
(403) 744-5229
inquiries@albertaracquetball.ca

<http://www.albertaracquetball.ca>

Applicant Information

Date :

Full Name

Street Address

City

Postal Code

Phone Number

E-Mail Address

Birth date (MM/DD/YY)

Gender
Male
Female

Home Facility

Coach

For minors...

Contact Person

Relationship to applicant

Phone Number

E-Mail Address

FOR INTERNAL USE ONLY

Funding Category

Maximum Funding Amount Allowed

AGLC approval required?
Yes
No

Meets Eligibility?
Yes
No

Partially

Application Result

Approved

Comments

Denied

Conditionally Approved
(pending funding approval)

Funding amount approved

Date

Reviewed By

Eligibility Requirements

Please check all eligibility requirements that you meet:

I can produce a valid Alberta Health Card.

I have been a member in good standing of the ARA for at least one year.

I have/will compete in at least three Alberta tournaments this season.

I have/will compete in the Alberta Provincial Championships this season.

I have/will compete in at least one Alberta tournament outside of my home city this season.

I am involved in a training schedule approved by a certified provincial coach.

I have/will attend the ARA's Annual General Meeting this season (elective).

I will sign and adhere to an Athlete Code of Conduct.

I am a member in good standing of Racquetball Canada and in compliance with all team requirements where applicable.

If applying for High Performance - Domestic OR International funding:

I am 29 years of age or under as of September 1st of the current season, OR am a member of the Canadian National Elite team or National Development team.

Junior athletes: I have/will compete at the Junior National Championships OR National Championships (Open division) this season.

Open-level athletes: I have/will compete this season in the Open division at RCs Fall & Winter Selection Events and National Championships.

If applying for Alberta Junior & Open Provincial Teams:

Junior athletes: I have/will attend any Provincial Team training camps this season.

Open-level athletes: I competed in the singles division in three sanctioned Alberta tournaments.

Open-level athletes: I competed this season in the Open division at RC's Fall & Winter Selection Events.

Comments/Explanations (Ex:
RC excused absence from
Nationals - injury)

Event Information - Please complete this page per event for which you're applying

Name

Event Type	Provincial	Is event invitation- only?	Yes
	National		No
	International		

Destination

Event Dates

Event Description/
Information

For national or international events, the following must be attached to this application:

Letter of invitation (if applicable)

Detailed daily schedule

Breakdown of registration fee - include what the tournament provides for transportation and meals, if the host hotel includes breakfast, and how much of the fee goes towards the banquet ticket

Estimated Expenses

Expenses listed should be for the athlete only. Please review the ARA Travel & Expense Reimbursement Policy for more details on what may or may not be claimed and maximum claim allowances.

	Cost	# of Days	Sub-Total
Transportation Costs			
Equipment Transport			
Accommodation			
Food			
Registration Fees			

TOTAL

Less: other funding sources

TOTAL ARA FUNDING REQUESTED

Supporting Documents

If applying for High Performance Domestic OR International funding, please attach the following to your application:

A letter of reference from your coach.

Your competition record from last season including tournament name, location, date, divisions entered, and results.

An outline of your competition goals for the current season. How will funding for this event help you to achieve those goals?

Your YTP (if applicable) or other supporting documents.

Athlete Declaration

I declare that the information provided on this application and in supporting documents is true and accurate to the best of my knowledge. I understand that providing false information could result in the denial of funding, the requirement to repay funding previously provided, and/or the denial of funding in the future. I agree to adhere to any requirements as stipulated by the ARA to receive said funding, including following through with my competition plan as outlined in this application.

Date

Applicant Signature

Parent/Guardian Signature (if
applicable)

Witness Signature