

# Canadian Tire Jumpstart Application Form

This form is an addendum to the Access Program Application Form and must be filled out to apply for Canadian Tire Jumpstart Funding



Return to: Manager of Recreation, Sarah Klein

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## Child / Youth Information

First Name

Last Name

## Request for Funding

I would like to request funding for:

Organization Name and Mailing Address (cheque payable to):

Program Duration: Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Total # of Weeks: \_\_\_\_\_

Length of each Session: \_\_\_\_\_

Registration Fee: \$ \_\_\_\_\_

(Proof of cost of program must be attached - e.g. brochure, letter from organization)

I certify my endorsement of the above child / youth and verify that all the information given is correct and can be substantiated. I also give permission to Canadian Tire Jumpstart to contact me if necessary.

Parent / Guardian Signature:

Date:

## For Office Use Only

Applicant Status:

Accepted

Declined

Date:

Notes:

Submitted to CTJS: