



APPLICATION FORM

KIDSPORT QC

SECTION 1 : INFORMATION ON THE CHILD

Full Name of the Child _____
Date of Birth ____ / ____ / ____ Sport Activity _____
Gender Boy Girl Self Disclose _____
Address _____
City _____ Parent's Telephone # _____
Postal Code _____ Parent's Email _____

SECTION 2 : INFORMATION ON THE SPORT ACTIVITY

Club or Program Name _____
Contact Person _____ Telephone _____
Email _____ Sport Requires Equipment Yes No
Total cost of registration _____ Funding Requested _____

SECTION 3 : INFORMATION ON THE FAMILY

Full Name of the Parent/Guardian _____
Relationship with the Child _____ Number of Children in the Family _____
Occupation _____ Social Assistance Yes No
Has your child received KidSport funding in the past? Yes No
Have you applied for funding from another organization? Yes No
Is it your child's first time practicing this sport? Yes No

Please select all that apply to your child from the list below.

- Athlete with a disability
 Indigenous Athlete
 New Canadian

SECTION 4 : DOCUMENTS

For your application to be complete, you must send KidSport Québec this application form, your most recent Canada Child Benefit Notice (CCB) and proof of your child's registration in the sport program. To submit your application or to ask questions about this program, please email alussier@sportjeunessequebec.ca.

Signature of the parent/guardian _____