

PERSONAL INFORMATION (Please Print)

Student Name: _____ Email: _____

Address: _____
Street Address City/Town Province Postal Code

School Currently Attending: _____ Grade: _____

ACTIVITY INFORMATION

Name of activity for which financial support is requested: _____

How were you selected to participate in this activity: _____

Description of activity: _____

Date(s) and location of activity and participation by student: _____

Financial support requested and types of expense to be applied to: _____

Benefit to be derived by student participation in activity: _____

CONFIRMATION

Student must print and sign form. Once signed, forms can be returned to the Secretary-Treasurer Department at 181 Henlow Bay or to evickers@pembinatrails.ca.

Student Signature	Date

I endorse the application.

Teacher/Coach Signature	Teacher/Coach Print Name