

STUDENT APPLICANT APPLYING ON BEHALF OF THE TEAM (Please Print)

Student Name: _____ Email: _____

Address: _____
Street Address City/Town Province Postal Code

School Currently Attending: _____ Grade: _____

TEAM ROSTER OF ALL STUDENTS PARTICIPATING MUST ACCOMPANY THIS APPLICATION.

ACTIVITY INFORMATION

Name of activity for which financial support is requested: _____

How was the team selected to participate in this activity: _____

Description of activity: _____

Date(s) and location of activity: _____

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

Benefit to be derived by TEAM participation in activity: _____

CONFIRMATION

I confirm that I am submitting this application on behalf of my team.

Please provide team details:

Student Signature	Date

Please ensure the roster of all students participating accompanies this request. Forms must be printed and signed by both the student and endorsing teacher.

I endorse the team application.

Teacher/Coach Print Name	Teacher/Coach Signature

Completed forms and roster can be sent to:
the Secretary-Treasurer at 181 Henlow Bay
or emailed to evickers@pembinatrails.ca