



**Funding Application**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NCCP NUMBER \_\_\_\_\_ CLUB NAME: \_\_\_\_\_

Reason for Funding

- Experience with SNC National, Junior and/or Para teams
- 101 Funding
- 201 Funding
- 301 Funding
- Other professional development activities

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Coach's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Club President's Signature

\_\_\_\_\_  
Date

Email for the E-transfer:

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**SWIM NB USE ONLY BELOW**

Application \_\_\_\_\_ Approved in the amount of \$ \_\_\_\_\_ \_\_\_\_\_ Declined

Reason \_\_\_\_\_

Date Paid \_\_\_\_\_

Cheque # \_\_\_\_\_