

TYPE B ATHLETE ASSISTANCE APPLICATION FORM

Athlete Assistance Agreement

between

(representing the athletes noted on “team members form” attached)

and the

Saskatchewan Broomball Association

I, _____ as the coach of the team noted above, understand what is expected of myself and the athletes attending the Juvenile Nationals regarding the Athlete Assistance grant.

I understand that this application must be sent to the SBA office by _____. I also understand that each athlete must submit a follow up report by _____ upon returning from the Juvenile Nationals. Anyone who does not return a follow up form will not be funded for future events.

Coach’s Signature _____ Date _____

TEAM MEMBER LIST

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
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11. _____
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19. _____
20. _____