

## Water Safety Fund in honour of Alex Ottley

Applications are considered on a first come, first serve basis, as well as the availability of funds. Program fees will be covered up to a maximum of \$68.50.

Completed applications should be emailed to: hagersvilleskatingclub@gmail.com

APPLICATION FORM: PLEASE ENSURE ALL INFORMATION IS COMPLETE AND ACCURATE (Please print clearly)

SECTION 1: APPLICANT INFORM					
Child's Name:	Date of Birth: (dd/mm/yyyy)				
Address:					
Name of Parent or Guardian:			(City)	(Province)	(Postal Code)
Telephone:	Email:				
SECTION 2: REQUEST FOR FUNI	DING				
Please indicate the Swim level:	Parent & Tot Preschool:	A B C D E	Swimmer: 1	2 3 4 5 6 7 8 9	Teen & Adult
Please indicate which Haldimand	d County Pool: Caledonia Lior	ns Pool Dunnvil	le Lions Pool	Hagersville Lions Pool	
SECTION 3: ENDORSEMENT					
Please provide the name of a perequire assistance from the Wat is active in community activities.	ter Safety Fund in honour of Alex . (Example; Teacher, Coach, Cler	x Ottley. This persongy, Social Worker,	on should be an Group Leader.)	adult who knows your o	child, and who
Name of Reference:					
Telephone: Day:					
(parent or guardia by the Hagersville Skating Club A	•			scuss personal Informat	ion as required
Signature:	(parent or guardian name)		Date:		
For Office Use Only: Date Received: (dd/mm/yyyy) _ Program Contacted: (dd/mm/yy Applicant notified: (dd/mm/yyy	yyyy) / / /	Accepted: (Y/N )	By:		



NEVER TOO YOUNG TO LEARN, NEVER TO OLD TO START.