THE FIELD HOCKEY BC FOUNDATION

www.fhbcfoundation.com

THE JUDY BROOM HIGH PERFORMANCE BURSARY

PHILOSOPHY:
The Judy Broom High Performance Bursary is presented annually by Field Hockey BC to assist a female athlete or athletes who can show a need for financial assistance in order to access program development opportunities within the Field Hockey BC Team BC Program. It is awarded to an individual or individuals who have participated in the Field Hockey BC Regional High Performance Program and have been selected to represent BC as part of the Field Hockey BC Team BC Program. The Award is designed to contribute towards the cost of the summer Team BC Provincial Program.

DESCRIPTION:
One award of up to $1000 will be made annually. However, if, in any one year, there are multiple candidates accepted, smaller amounts may be considered.

PURPOSE:
The Judy Broom Foundation Fund Athlete Assistance Award is designed to provide financial assistance to encourage a **female** or **females** to continue their athletic development as part of the Field Hockey BC Provincial Program.

CRITERIA: The applicant must
1. Be a female member in Good Standing of Field Hockey BC
2. Have participated in the Field Hockey BC Regional Athlete Program
3. Have been selected to a FHBC Team BC Provincial Team
4. Show why there is a need for financial assistance to continue with the Field Hockey BC Team BC Provincial Program

TIMELINES:
Applications must be received by **July 8th, 2018**; the Award winner or winners will be announced in July.

APPLICATIONS SHOULD BE SENT TO:

THE FIELD HOCKEY BC FOUNDATION
RE: THE JUDY BROOM HIGH PERFORMANCE BURSARY
202-210 WEST BROADWAY
VANCOUVER, BC
V5Y 3W2
EMAIL: INFO@FIELDHOCKEYBC.COM
FAX: 604-873-6488

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APPLICATION FORM

PERSONAL DETAILS

NAME:_____

ADDRESS:_____

CITY:_____

POSTAL CODE:_____HOME PHONE:_____

E-MAIL:_____

HISTORY/PARTICIPATION

PLEASE LIST YOUR PAST/CURRENT FHBC REGIONAL HIGH PERFORMANCE TEAMS:

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

PLEASE LIST YOUR PAST/CURRENT BC PROVINCIAL TEAMS:

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

TEAM:_____YEAR:_____ RESERVE PLAYER? YES ◯ NO ◯

ESTIMATED LEVY COST FOR THIS YEAR'S BC PROVINCIAL TEAM:_____

REASONS FOR APPLICATION *(INCLUDING PERSONAL CIRCUMSTANCES AS APPROPRIATE)*

PLEASE DESCRIBE WHY YOU CHOSE TO APPLY FOR THIS AWARD:

INTENDED USE OF FUNDS:

REFERENCES

REFERENCE: PLEASE LIST A PERSON WHO MAY BE CONTACTED TO SPEAK ON YOUR BEHALF
NAME:_____
RELATIONSHIP TO YOU: (ex: teacher/coach/mentor)_____
_____
EMAIL:_____PHONE:_____

OFFICE USE ONLY

DATE RECEIVED: _____
DATE PROCESSED: _____
RESPONSE SENT DATE (AS APPROPRIATE): _____
AWARD ALLOCATED: Y / N
AMOUNT ALLOCATED: $_____