



## **“For the Kids Active Fund”**

### ***Information Sheet***

**“For the Kids Active Fund”** enables West Prince children who are experiencing financial or social barriers to participate in programs and activities that promote a healthy active lifestyle.

#### ***Outcomes:***

- Being Healthy: increase health and well-being of children and families in West Prince;
- Enjoying and Achieving: increase in participation in activities that children and families want to do for enjoyment and at the same time maximize their potential and develop life long skills;
- Positive Contribution: increase in activities that enable children and families to develop their confidence, knowledge, skills and abilities to enhance their own lives.

#### ***Criteria for applying:***

- children and or families benefitting from the program must be experiencing financial and or social barriers;
- children under 19 years must benefit from the fund;
- activities must focus on promoting physical activity;
- activities must meet one of the three outcomes: Being Healthy, Enjoying and Achieving and Positive Contribution.

#### ***How to access the fund:***

- For the Kids Active Fund may be accessed through the professional community who works directly with children and families in West Prince. Examples: (school counselor, youth justice worker, school principal, social worker, etc.). One agencies/professionals must sign the attached application form. In some situations, a letter of support from a collaborating agency may be required, only “upon request” from the “For the Kids Active Fund” Committee.
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#### ***Funding Available:***

- Applications will be reviewed continuously throughout the year and funding amounts will be based on available funding. It is anticipated that the maximum grant awarded will be \$200.00



## “For the Kids Active Fund”

### Application Form

#### Applicant Information

Applicant’s Name 1:	_____
Date of Birth:	_____
Applicant Name 2:	_____
Date of Birth:	_____
Applicant Name 3:	_____
Date of Birth:	_____
Address:	_____
Telephone #:	_____
Email address:	_____

#### Project Information

Description of the Program/Activity that you would like to participate in?	
_____	
_____	
_____	
Location/Program Provider: _____	
Duration of Program: _____	
Costs associated with participation in this program/activity:	
<b>Description of Expense</b>	<b>Amount</b>
_____	_____
_____	_____
_____	_____
<b>Total Expenses:</b>	_____
<b>Amount of Request:</b>	_____

Applicant Signature:	_____
Parent/Guardian Signature:	_____
Date:	_____

