INSPIRE & EMPOWER CHAMPIONS IN SPORT AND LIFE

GYMNASTS FIRST GRANT PROGRAM 2025-2026

Gymnastics Saskatchewan has established a grant funding program to assist competitive gymnasts of families facing financial obstacles to participate in gymnastics at provincial, national and high-performance levels. The goal of the "Gymnasts First" program is to provide these children and families with increased opportunities to achieve their goals and dreams to help reach their fullest potential, and to provide financial support to assist them in their goal of competing in Saskatchewan and Canadian championships. Individual grants of varying amounts, depending on need, are available for gymnasts aged 21 and under.

ELIGIBILITY

Families with a maximum combined family gross income of under $75,000 are eligible to be considered for financial support. Gymnasts must be 21 years of age and under, and registered members with a club in good standing with Gymnastics Saskatchewan as National Stream or Provincial Stream athletes.

GRANT CRITERIA

Applications will be screened to ensure financial need and legitimacy of the applicant.

- Funding amounts will be based on:
  - Number of applicants and availability of grant money;
  - Combined family income under the threshold of $75,000;
  - Income verification as determined by 2024 or most recent CRA Notice of Assessment or Record of Employment.
  - Annual club fees:
  - Competitive level of the gymnast – athletes competing at the highest level will take priority; (only Provincial and National level athletes will be considered for support)
  - Estimated annual competition/travel costs for the level of the athlete as determined by Gymnastics Saskatchewan.

ALLOWABLE EXPENDITURES

Funding may be used only for club fees. Gymnastics Saskatchewan will issue funds directly to the gymnast's home club to pay for a portion of club fees.

APPLICATIONS AND APPROVAL

Confidential applications will be accepted once annually – deadline for applications is **December 1st, 2025**. Applications must be completed in full and must include verification by an endorser (teacher/principal, social worker, lawyer, or a member of the clergy). A copy of the most recent Revenue Canada Notice of Assessment or Record of Employment from both parents, if applicable, must be submitted.

INSPIRE & EMPOWER CHAMPIONS IN SPORT AND LIFE

GYMNASTS FIRST GRANT APPLICATION

Deadline: December 1, 2025

PARTICIPANT INFORMATION

Gymnast's Full Name: _____

Address: _____ City: _____ Postal Code: _____

Age and Birthdate: _____ Gender: _____

Club: _____

Level of Competition in 2024-2025: _____ (please verify with your coach)

Training Hours Per Week _____

Coach: _____

PARENTS/GUARDIANS

Parent/Guardian 1: _____

Occupation: _____ Full-time/Part-time _____

Parent/Guardian 2: _____

Occupation: _____ Full-time/Part-time _____

MAIN CONTACT INFORMATION

Telephone: home _____ Email address: _____
work _____
cell _____

INCOME VERIFICATION

A copy of your most recent CRA Notice of Assessment or Record of Employment must be submitted with this application.

Please state your annual family income.

Parent/Guardian 1 $_____

Parent/Guardian 2 $_____

If a one parent family, please indicate actual monthly or annual financial support received from the other parent for gymnastic costs.

$ _____

Number of children at home under age 19: _____

Please outline/describe any extenuating financial circumstances.

GYMNASTICS CLUB FEES

Please outline your projected gymnastics expenses for the year **September 1, 2024, to August 31, 2025:**

Annual club fees less fundraising commitment $ _____

Fundraising commitment amount $ _____

Do you pay this FR amount or work it off? _____

_____ _____

Signature of Applicant/Parent/Guardian Date

Submit your application to:
Terrol Russell, CEO
Gymnastics Saskatchewan, 300-1734 Elphinstone Street, Regina, SK S4T 1K1
Email: ceo@gymsask.com

ENDORSER VERIFICATION

The endorser is a third party who can assess the financial situation of the family. Please choose one of the following as your endorser: teacher/principal, social worker, lawyer, clergy member.

Endorser's Name: _____

Organization: _____Position: _____

Address: _____City: _____

Postal Code: _____Phone: _____

Email: _____

I (endorser na_____y that the family of this applicant has financial need and should qualify to receive a Gymnasts First Grant from Gymnastics Saskatchewan.

_____ _____

Signature of Endorser ***Date***