



## Application for Equipment for Individuals

### APPLICATION CHECKLIST

- All blanks in Steps 1 and 2 are filled in and complete.
- Please make sure all equipment needed is listed on provided pages, **along with detailed sizing needs.**
- I am aware that I am responsible for any and all shipping costs associated with receiving the equipment.

Administered by  
**Sport**  
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# Individual Equipment Application to the KidSport™

The KidSport™ Fund is a national charity created to assist children from financially disadvantaged families to enter into sport programs where they can develop life skills such as fair play, leadership and teamwork.

In Manitoba, KidSport equipment is collected and distributed by the Manitoba Aboriginal Sport and Recreation Council in partnership with Sport Manitoba.

The amount and type of equipment collected is limited. Please consider your equipment needs carefully before submitting this application. Be aware that the fulfilment of your application will depend on equipment availability. **Incomplete applications will not be considered.**

**Please read the following guidelines carefully before completing this form.**

## FUNDING POLICIES

- A) Equipment grants to individual athletes are designed to help those who would not play a sport without KidSport's help and will be provided **if equipment is available**, on a first come first serve basis.
- B) KidSport assists children aged 18 and under, with preference given to kids trying a sport for the first time
- C) KidSport will contact the recipient to collect his/her equipment. In Winnipeg, the recipient is responsible for picking up the equipment at the location indicated by Kidsport. In all other locations, the equipment will be shipped to the closest bus depot/drop-off location. The local bus depot will contact the recipient who is then responsible for picking up the equipment.
- D) **Equipment is previously used and will be distributed as is.**

**DEADLINE: No Application Deadline – Subject to Availability of Equipment**

# Individual Equipment Application to KidSport™

## STEP 1 CHILD INFORMATION

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Male  Female Age \_\_\_\_\_ Birth Date: Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

Sport Child will be Participating in: \_\_\_\_\_ Number of Years in Sport: \_\_\_\_\_

Sport Organization: \_\_\_\_\_

### General Information

Age: \_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Clothing Size: \_\_\_\_\_ Jacket Size: \_\_\_\_\_ Shoe Size: \_\_\_\_\_

## STEP 2 PARENT / SPONSOR / GUARDIAN INFORMATION

**Note: The parent/guardian/sponsor will act as the contact person for the child & will receive all correspondence.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address (if different from Child's): \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Relationship to Child (i.e. Parent/Sponsor/Guardian/other): \_\_\_\_\_ Date: \_\_\_\_\_

**STEP 3 EQUIPMENT SELECTION**

If possible, please try on equipment (ex: a teammates, at a store) to ensure correct sizes.

**HOCKEY / RINGETTE / IN-LINE HOCKEY (please circle correct sport)**

	<u>Youth</u>	<u>Junior</u>	<u>Senior</u>
<input type="checkbox"/> -Helmets	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.
<input type="checkbox"/> -Shoulder Pads	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.
<input type="checkbox"/> -Elbow Pads	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.
<input type="checkbox"/> -Glove	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.
<input type="checkbox"/> -Pants	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.	<input type="checkbox"/> -Sm. <input type="checkbox"/> -Med. <input type="checkbox"/> -Lg.
<input type="checkbox"/> -Shin Pads	<b>Yth.</b> _____ inches	<b>Jr.</b> _____ inches	<b>Sr.</b> _____ inches
<input type="checkbox"/> -Skates	Size _____ (usually one size lower than your running shoes)		
<input type="checkbox"/> -Stick	<input type="checkbox"/> -Left	<input type="checkbox"/> -Right	

\* Goalie equipment may be available upon request.

**SOCCER**

<input type="checkbox"/> -Shoes	_____ (same size as your running shoes)		
<input type="checkbox"/> -Shin Pad Size	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	
<input type="checkbox"/> -Shorts	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	
<input type="checkbox"/> -Jersey	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	
<input type="checkbox"/> -Ball	<input type="checkbox"/> -Size 3 (3-8 Yr. Olds)	<input type="checkbox"/> -Size 4 (9-12 Yr. Olds)	<input type="checkbox"/> -Size 5 (13 Yrs. & Up)

**GOLF**

<input type="checkbox"/> -Shoes	_____ (same size as your running shoes)
<input type="checkbox"/> -Clubs	<input type="checkbox"/> -Left <input type="checkbox"/> -Right

**BASEBALL / SOFTBALL**

<input type="checkbox"/> -Bat	<b>Junior</b> _____ inches	<b>Senior</b> _____ inches
<input type="checkbox"/> -Glove	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large
<input type="checkbox"/> -Helmet	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large
<input type="checkbox"/> -Cleats	_____ (same size as your running shoes)	

**CATCHER'S EQUIPMENT**

<input type="checkbox"/> -Shin Pads	<b>Junior</b> _____ inches	<b>Senior</b> _____ inches
<input type="checkbox"/> -Mask	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large
<input type="checkbox"/> -Glove	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large
<input type="checkbox"/> -Belly protector	<b>Junior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large	<b>Senior</b> <input type="checkbox"/> -Small <input type="checkbox"/> -Medium <input type="checkbox"/> -Large

**STEP 4 EQUIPMENT SELECTION: IF REQUIRED**

**OTHER EQUIPMENT**

Please list all items you require. Equipment will not be disbursed if it is not listed below.  
Please be as specific as possible with all sizes.

Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____
Item requested _____	Size requested _____

**For Office Use Only**

Name: \_\_\_\_\_ Region: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WHERE DO I MAIL OR FAX THE COMPLETED APPLICATION FORM?**

**MANITOBA ABORIGINAL SPORTS AND RECREATION COUNCIL INC.**

Mailing address:  
Room # 105 - 145 Pacific Avenue  
Winnipeg, MB  
R3B 2Z6  
Phone#: 204-925-5737  
Fax #: 204-925-5716  
e-mail: [MASRCOffice@sportmanitoba.ca](mailto:MASRCOffice@sportmanitoba.ca)

**Questions?**

**Call the KidSport™ Toll Free Line at 1-866-774-2220.**