



PICTOU COUNTY CHAPTER

Canadian Tire Jumpstart helps financially disadvantaged kids get involved in organized sport and recreation by covering cost for registration and equipment.

Our goal is to help those children that would not be able to participate in a physical activity without the assistance of the Canadian Tire Jumpstart program.

WHO CAN APPLY?

- Applications can only be filled out by parents/guardians and is for children aged 4-18. The program is open to individual children, not groups or teams.
- Funding is available for multiple children within the same family.

WHAT DOES THE FUNDING COVER?

- Funds are awarded for registration fees and equipment.
- Grants are available for up to \$300 per child per calendar year.

WHAT KIND OF SPORT OR RECREATION ACTIVITY IS COVERED?

- Funding is available for any sustained program that lasts a season
- Funding must be for on-going activities or programs

IS THE APPLICATION CONFIDENTIAL?

- Confidentiality of all recipients will be respected.

OTHER FAQs

- Incomplete application forms will be sent back for completion, if required.
- Applicants will receive a letter after the deadline notifying them of the status of their application.
- Grants are made payable to a league, association or club

HOW TO APPLY

Completed forms can be sent to your local **Municipal Recreation Department** or directly to:

Pictou County Recreation
P.O. Box 910 - 46 Municipal Drive
Pictou, NS B0K 1H0
Phone: (902) 485-8528 or
Fax: (902) 485-6475
Email: recreation@munpict.ca

Feel free to contact them as well to assist you filling out the application!

DEADLINES

February 1 ▲ April 1
June 1 ▲ August 1 ▲ October 1

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The way we see it,
the answer to
“Can I Play?”
...should always be **YES!**

Online application available at
www.activepictoucounty.ca



Canadian Tire Jumpstart Application Form

Pictou County Chapter



Please ensure this form is fully completed

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name				
Mailing Address				
City/Town	Prov.		Postal Code	
Home Phone	Other Phone			
Email	Relationship			
Household (HH) Details	Number of Children in HH: _____	Size of Household: _____ 1 Parent _____ 2 Parent		
Signature of Parent/Guardian			Date	

CHILD/YOUTH INFORMATION

Child/Youth Name				
Mailing Address				
City/Town	Prov.			
Home Phone	School Name			
Age	Date of Birth			

SPORT/RECREATION INFORMATION

Sport/Recreation Activity Requested				
Program Duration	Start: _____	End: _____	# Wks.	
Organization Name	Contact			
Mailing Address	Phone			
City/Town	Prov.		Postal Code	
First time participating in this activity?	Yes _____ No _____ If no, for how many years? _____			
Organization Email				

GRANT REQUEST (Expenses the grant will be used for)

Registration Fees	\$			
Equipment	\$			
Total Request	\$			
Previous Canadian Tire Jumpstart Support	Has your child received previous Jumpstart funding? _____ No _____ Yes If yes, when?			

REFERENCE INFORMATION

Please provide a reference that is familiar with your situation and who can verify that you require assistance. This person must be a non-family member or friend. They can be a social worker, teacher/principal, employer, counselor, police officer, clergy member, etc.

Name	
Position	
Daytime Phone	
Email	
Relationship	
<i>I support the request on behalf of the youth named whose need is consistent with the Canadian Tire Jumpstart program guidelines.</i>	
Signature	
Date	

CONFIDENTIALITY

All information received is kept confidential.

CANADIAN TIRE STORE LOCATION

Is there a Store in your area?	Yes _____ No _____
If no, please indicate the nearest store	

Office Use Only

Received	
Decision	<input type="checkbox"/> Approved <input type="checkbox"/> Declined
Amount	