Application to participate in the TenCount Amateur Athlete Assistance Program

Date _____

Name: _____

First Middle Last

_____

Age Sex

Address: _____

Street

_____

City Province/State Postal/Zip Code

School/Employment: (Are you a student? What are you taking? Do you work? etc)

_____

_____

Do you currently have sponsorship or other funding? _____

Sport: _____ Governing Body: _____

Years in Sport: _____ Record: _____ Other Training: _____

Event Dates: _____ Title of Event: _____

Please provide a brief description of yourself and your goals:

_____

_____

_____

_____

What other information should be considered: _____

_____

_____

_____