



THE FIELD HOCKEY BC FOUNDATION

www.fhbcfoundation.com

THE JUDY BROOM HIGH PERFORMANCE BURSARY

PHILOSOPHY:

The Judy Broom High Performance Bursary is presented annually by Field Hockey BC to assist a female athlete or athletes who can show a need for financial assistance in order to access program development opportunities within the Field Hockey BC Team BC Program. It is awarded to an individual or individuals who have participated in the Field Hockey BC Regional Talent Evaluation Program and have been selected to represent BC as part of the Field Hockey BC Team BC Program. The Award is designed to contribute towards the cost of the summer Team BC Provincial Program.

DESCRIPTION:

One award of up to \$1000 will be made annually. However, if, in any one year, there are multiple candidates accepted, smaller amounts may be considered.

PURPOSE:

The Judy Broom Foundation Fund Athlete Assistance Award is designed to provide financial assistance to encourage a **female** or **females** to continue their athletic development as part of the Field Hockey BC Provincial Program.

CRITERIA: The applicant must

1. Be a female Registered Participant in Good Standing of Field Hockey BC
2. Have been selected to a FHBC Team BC Provincial Team
3. Show why there is a need for financial assistance to continue with the Field Hockey BC Team BC Provincial Program

TIMELINES:

Applications must be received by **July 31st**; the Award winner or winners will be announced in August.

APPLICATIONS SHOULD BE SENT TO:

THE FIELD HOCKEY BC FOUNDATION
RE: JUDY BROOM HIGH PERFORMANCE BURSARY
SUITE 101, 7455 132nd STREET
SURREY, BC
V3W 1J8
EMAIL: INFO@FIELDHOCKEYBC.COM
FAX: 604-873-6488



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THE JUDY BROOM HIGH PERFORMANCE BURSARY APPLICATION FORM

PERSONAL DETAILS

NAME: _____

ADDRESS: _____

CITY: _____

POSTAL CODE: _____ HOME PHONE: _____

E-MAIL: _____

HISTORY/PARTICIPATION

PLEASE LIST YOUR PAST/CURRENT FHBC REGIONAL HIGH PERFORMANCE TEAMS:

TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>

PLEASE LIST YOUR PAST/CURRENT BC PROVINCIAL TEAMS:

TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>
TEAM: _____	YEAR: _____	RESERVE PLAYER? YES <input type="radio"/>	NO <input type="radio"/>

ESTIMATED LEVY COST FOR THIS YEAR'S BC PROVINCIAL TEAM: _____

REASONS FOR APPLICATION (INCLUDING PERSONAL CIRCUMSTANCES AS APPROPRIATE)

PLEASE DESCRIBE WHY YOU CHOSE TO APPLY FOR THIS AWARD:

INTENDED USE OF FUNDS:

REFERENCES

REFERENCE: PLEASE LIST A PERSON WHO MAY BE CONTACTED TO SPEAK ON YOUR BEHALF

NAME: _____

RELATIONSHIP TO YOU: (ex: teacher/coach/mentor) _____

EMAIL: _____ PHONE: _____

OFFICE USE ONLY

DATE RECEIVED: _____

DATE PROCESSED: _____

RESPONSE SENT DATE (AS APPROPRIATE): _____

AWARD ALLOCATED: Y / N

AMOUNT ALLOCATED: \$ _____