



Barrhaven Scottish Rugby Football Club

ELITE ATHLETE FUND APPLICATION FORM - 2025 SEASON

Player name: _____

Program: _____
(Snr Men, U14 Girls etc)

Rugby Canada Registration Number: _____

Please list all instances in which you attended a Regional and/or National training camp and/or match(es) from January 1, 2025 to December 31, 2025 (in chronological order), which required you to travel outside Ottawa.

Date (yyyy-mm-dd)	Program Level: Regional/Provincial/ National	Training Camp/ Match	Opposition, if Match	Location

Please list your objectives for the upcoming rugby season:

Declaration:

I _____ acknowledge that the Barrhaven Scottish RFC Elite Athlete Fund is only for Club Members in good standing. I also acknowledge that the amount of the funding may vary year based in a number of factors including the number of Club Members requesting assistance.

Signature: _____ Date: (yyyy-mm-dd) _____

Telephone and/or Mobile number: _____

Address: _____