

# 2014 Heather Wellman Youth Bursary Application Form



Deadline: 30 May 2014

Your application **MUST** be filled out completely to be considered for this Youth Bursary.

## Details of the award:

- Two complimentary clinics in our 2014 series ([www.eventingcanada.com](http://www.eventingcanada.com))
- Two complimentary entries to an OHTA non-championship competition.
- Two complimentary OHTA membership for 2014.

## Applicant Information

Name:

Date of Birth:

Address:

Email:

City: \_\_\_\_\_ Province: \_\_\_\_\_ P. C.

Phone:

Parent/Guardian:

Gross Household Annual Income: \$

## Applicant's Coach

Name:

Stable:

Address:

Phone:

Working with this coach since:

Frequency of lessons:

**\*\* Please Attach a Letter of Recommendation\*\***

## Previous Eventing / Horse Trials Experience:



**School Information**

**Contact Person:**

**Name:**

**Phone:**

**Address:**

**Fax:**

**\*\* Attach an Official School Transcript\*\***

**\*\*Attach a Letter of Recommendation from Principal/Guidance Councilor/Teacher\*\***

*Please answer each of the below questions in 200 words or less:*

**1) Please describe your interest and experience with Horses:**

**2) Why do you want to pursue an Eventing / Horse Trials career?**

**3) Please describe your competition/education plan for the 2014 season:**

**4) Please describe how you plan to finance the plan outlined above:**

**\*\*Please include in your application a photo of yourself and your horse which will not be returned to you\*\***

**Release Form**

I, \_\_\_\_\_ (parent/guardian) acknowledge that \_\_\_\_\_ is applying for Eventing Canada [!]'s Youth Bursary, and understand that he/she will be expected to receive coaching and compete in equestrian sports. I hereby consent to his/her involvement in this activity. This is to certify that the information provided is accurate and the applicant and parent/guardian agree to use the proceeds from the bursary to further the applicant's equestrian skills.

Signature: \_\_\_\_\_  
(Applicant)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Parent/guardian)

Date: \_\_\_\_\_

Please send completed application Package to: *Eventing Canada [!]*  
Attn: Eventing Canada[!] Youth Bursary  
59 Hillside Drive,  
Toronto, ON M4K 2M1

