

The Equestrian Association for the Disabled

CONFIDENTIAL APPLICATION FOR SUBSIDY

Introduction

Through the generosity of community funders and individual donors, TEAD is pleased to be able to provide opportunities for rider and camper sponsorship when available. To learn how to access this opportunity, please read our subsidy policy available on the TEAD website www.TEAD.on.ca

Please complete this form and submit to admin@tead.on.ca or drop off to Kim Curran-Meadowcroft

**All information provided for the purpose of subsidy consideration will be kept confidential

Name of Applicant	:								
Street Address:									
				Postal Code:					
Daytime phone:			Alternate	e Phone:					
Email address:									
l am applying for :									
Myself	My child								
Other (please provide relationship to applicant)									
Program applied for (please circle):									
Riding session –	Spring	Summer	Fall	Summer Camp					
Has the applicant received a subsidy from TEAD previously? Yes No									
If so, date of last s	ubsidy awa	arded:							

Financial Information
Please provide a brief explanation of why you are requesting subsidy, including relevant details to demonstrate financial need:
Annual household income \$
Amount of subsidy requested (maximum 80% of program fee):
Confirmation / Verification
I have read and understand TEAD's subsidy policy. I understand that to receive a subsidy I must contribute a minimum of 20% of the applicable program fee and am responsible for covering the cost of any applicable membership fees. I confirm that the information provided is this application is true in a aspects.
I understand that the participant portion of fees must be paid in full prior to program start date in order to be admitted to the program and permitted to participate.
Signed: Dated:

Office Use Only:
Application received: