



Provincial Sailing Association

Approval Request Form

Portsmouth Olympic Harbour 53 Yonge Street | rue Yonge Kingston, Ontario Canada K7M 6G4 613.545.3044 www.sailing.ca

Applicant Information (please print or type)

Club Name			
Club Address			
City, Post Code			
Program Contact			
E Mail	Phone		
No of Participants		Years in Existence	
Amount Requested		Purchase order (ne	w) or 3 Appraisals Required (used)
Description of Equipm	ent		
Please provide full details of	f the boat(s) and rela	ted equipment (sails, motor	etc)
Declaration			
I (we) understand that the sa individuals) and cannot be so			property of the club (not any Sail Canada.
I (we) understand that the sailboats must be suitable for the safe instruction of youth and/or disabled sailors.			
I (we) understand that the sa focused and be open to the g		these boats are to be used r	nust be youth and/or disabled
I (we) understand that the sa Sail Canada certification and		e based on Sail Canada trair	ning standards and use official
	fundraising efforts, ar		railability of monies, my (our) pats/sails purchase within Sail
I (we) promise to submit prod	of of purchase within t	hirty days after receiving assi	stance
	Print Name	Signature	Date
Club Commodore			
Treasurer/Sailing Director			