**APPLICATIONS** 

Applicants must have participated in middle school, high school or post

secondary school sports OR a local accredited sports program within the last 2

years. (Some exceptions may apply)

• Student/Athlete must be attending or have attended school in one of the following

school divisions:

Medicine Hat Public School Division No.16

Medicine Hat Catholic Board of Education

Prairie Rose School Division

Medicine Hat College

OR was registered in Medicine Hat and Area local Sports within the

previous 2 years.

Recipients will be notified by Strikeout Stigma concerning award of funds and will

be paid out to a maximum of 500.00 directly to the applicant's choice of licensed

mental health practitioner.

Applications will be reviewed in a timely manner and all funding decisions will be

made by Strikeout Stigma board members.

All information will be kept confidential with access limited to Strikeout Stigma

board members only.

ALL COMPLETED APPLICATIONS CAN BE SUBMITTED BY EMAIL OR STANDARD

MAIL VIA THE ADDRESSES BELOW:

Email: strikeoutstigmainfo@gmail.com

Mailing Address: 2002 23 St. SE, Medicine Hat AB, T1A2E4

## **STRIKE OUT STIGMA In Honour of Mason Close**

**Application form for Mental Health Counselling Funding** 

**Post Secondary School** 

Date
Name
Date of birth
Address
Telephone number
Email
How many years have you resided in Medicine Hat/Area
Local school you are currently attending and grade
OR

Program year started
Year expected to complete
Where you graduated and year
Sport involvement
Team Name (If applicable)
Coaches Name (If applicable)
Years played
Mental Health Counsellor's Name
Mental Health Counsellor's Address
Mental Health Counsellor's Telephone Number