



Health and Wellness
Sport, Recreation and Physical Activity

**Amateur Sport Support Program
Elite Athlete Assistance Program Agreement
Acknowledgement and Waiver
2015-2016**

To: Elite Athlete Assistance Program Recipients
From: Sport, Recreation and Physical Activity Division
Re: Athlete Assistance Program Funding

Acknowledgement and Waiver by Athlete

I acknowledge that I am responsible for making all necessary investigations with the National Collegiate Athlete Association (NCAA), or other athletic organizations as necessary, to determine whether receipt of assistance under the Elite Athlete Assistance Program would negatively affect my status as an amateur athlete. I confirm that I am solely responsible for making this determination, and confirm that Sport, Recreation and Healthy Living have given me no assurances and made no representation in this regard. I will not make any claims against Sport, Recreation and Healthy Living regarding my amateur status.

Athlete's Signature

Witness/Parent/Guardian*

Print Name

Print Name

*** This waiver must be signed by a parent/guardian if the recipient is under the age of 18.**

Note: Due to availability of funding in any fiscal year Sport, Recreation and Healthy Living reserves the right, without prior notification, to limit the amount of funding to any sport/athlete.

Please forward the completed application, including the Provincial Sport Organization designate's signature to:

**Elite Athlete Assistance Program
Sport, Recreation and Physical Activity
Department of Health and Wellness
PO Box 2000
Charlottetown, PE C1A 7N8**

If you have any questions, please contact The Sport, Recreation and Physical Activity Division, telephone 368-4789, or by emailing John Morrison at jwmorris@gov.pe.ca