



# NOOKSACK INDIAN TRIBE SPORT & RECREATIONAL ASSISTANCE APPLICATION



The North Sound ACH Capacity Building Fund is to provide financial support for Individual and Team Recreational requests. **The following information is required:**

- Proof of Nooksack Enrollment or Nooksack Lineal Decendency from Enrollment Dept.
- Proof of Event (*copy of the completed participant application*) AND
- Proof of Associated Costs
- Must live in Washington State
- Organization's completed W-9 (*if payment is made directly to an organization*)
- If this is a "Team Request" the primary Applicant on this form will need to submit a document listing the Team Name, names of all team members, AND meet all other requirements listed above. For the Team as a whole; Only one (1) proof of event, total cost, and W-9 per team request.

INDIVIDUAL APPLICANT INFORMATION				
Applicant's last name:	First:	Middle:	Birth date:	Age:
Street address:	P.O. Box:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Enrollment Number:	
	City:		State:	ZIP Code:
Best Contact Phone Number: (     )		Email Address:		

EVENT INFORMATION <b>(RECEIPTS ARE REQUIRED FOR ALL APPLICANTS)</b>		
Name of Organization / Event requesting assistance for:	<b>Type of Assistance Needed (check all that apply)</b>	
	Registration <input type="checkbox"/>	Cost:
	Uniform <input type="checkbox"/>	Cost:
Name and Address where to send payment: ( <i>W-9 may be required</i> )	Gym Pass <input type="checkbox"/>	Cost:
	Fitness Class <input type="checkbox"/>	Cost:
	Aquatic Center pass: Adult <input type="checkbox"/> Youth/Senior <input type="checkbox"/> Family <input type="checkbox"/>	Cost:
	Gas/Fuel <input type="checkbox"/>	Cost:
	Lodging <input type="checkbox"/>	Cost:
	Other <input type="checkbox"/> ( <i>Specify</i> )	Cost:

Please attach all required documentation to this application, and submit your request via email, interoffice, or hand deliver to reception staff at the Medical Clinic. Address your packet to the Operations Manager, Therese Davis <a href="mailto:tdavis@nooksack-nsn.gov">tdavis@nooksack-nsn.gov</a> .	
If any of the information required to determine eligibility is missing it <b>WILL</b> result in a denial of your application. By signing the application below, I agree I have read and understand the requirements of this application.	
<b>X</b> <i>Client Signature</i>	<b>X</b> <i>Date</i>
<b>X</b> <i>Staff Signature</i>	<b>X</b> <i>Date Received</i>

*(For Official Use Only)*

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

- APPROVED
- DENIED: (*Explain why*) \_\_\_\_\_

Authorized Signature: \_\_\_\_\_



## **Nooksack 2022-23 Sports and Recreation Grant Policy**

The Nooksack Indian Tribe would like to encourage individuals and team-sport applicants to apply for funding for the 2022-23 fiscal year. Please review the Sports and Recreational Policy below before you apply.

**1. Application Periods run as follows:**

- a. November 21, 2022 through May 31, 2023.*
- b. June 1, 2023 through December 31, 2023.*

**2. Application needs to be filled out by Enrolled parent for all Dependency applicants.**

**3. ALL applicants are REQUIRED to submit Receipts for all approved purchases.**

- a. If you receive funds from the first (1<sup>st</sup>) Application Period, and fail to return all receipts, you will be ineligible to re-apply during the second (2<sup>nd</sup>) Application Period.*

**4. ALL applications will be reviewed for eligibility by a designated Review Team, and their decisions are final.**

**5. Incomplete Applications will not be approved.**

**6. The grant must be used by the person who applied and was approved by the Review Team; no portion of the grant award may be transferred to another person.**

**7. Gas/Lodging for travel expenses are eligible at the Government Per Diem rate, not to exceed an amount for two (2) day of travel and two (2) night lodging.**

- a. Lodging and Gas requests will be reviewed on a case by case basis.*

**8. Aquatic Center Passes may be provided for either 10 visits or a 3-month Pass, for Individuals or up to 6 members of the same household only. May not be used or transferred to any other person.**

- a. Applications for each person requesting use of the pass is required.*

**9. Gym Passes are provided; up to \$125 per month.**

**10. Funding is NOT eligible for reimbursement of past events; only future sport / recreation events are eligible.**

- a. Reimbursement is not guaranteed; participant must meet Review Team's eligibility requirement.*
- b. All receipts must accompany any requests for reimbursement to be considered.*

**11. Requests will not be considered for:**

- a. Food/Groceries.*
- b. ALL clothing and/or shoes not related to Required Uniforms/Attire for sport events.*
- c. Public forms of transportation.*

**12. The maximum amount requested is not guaranteed; funding is determined based on the amount of applications received and the information provided in your application.**