First Nation of Na-Cho Nyäk Dun - Department of Education/Training, Daycare and Youth
Box 220
Mayo, Yukon Y0B 1M0
Tel: (867) 996-2265 Ext: 136
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Website: www.nndfn.com

YOUTH RECREATION FUND

Given name:	**Surname:**
Date of Birth: Year/Month/Date	**Please check one:** Status ○ Beneficiary ○
Permanent Address/street:	**City/Town:**
Province/Territory:	**Postal Code:**
Telephone number: Cell Number:	**Email Address:**

Recreation Event:_____Coach's contact number:_____

Provided by:_____ Location:_____

Leave Date:_____ Return Date: _____

Start Date:_____ End Date: _____

Applicant's Annual Income:_____ Spouse's Annual Income:_____

Did you apply for any other funding agencies: YES OR NO **(Please submit copy of the event schedule)**

Have you tried to apply for any other recreation funding? Yes or No

(If you make under $30,000 a year, you can apply to Sport Yukon for recreational cost at http://www.sportyukon.com)

Note: Applicant is responsible for making hotel reservations, if you do not attend; you need to cancel your room. NND will not be responsible for the room if you have failed to cancel the room or no show.

Expenses	**Requesting**	**For Office Use Only: Amount approved**
Registration	$	
Books/Supplies	$	
Meals	$	
Incidentals	$	
Hotel **Name:**	$	
Private Accommodation	$	
Gas Purchase - One Way	$	
Gas Purchase - Return Trip	$	
Airfare	$	
Other:	$	
Total Amount	$	

For Office Use Only: **Date Received:**_____ **Sent to Main Office On:** _____

DEPT: **EDUCATION** PROGRAM: **YOUTH** CODE: **32600**

Notes:_____

Approved by: _____ Date: _____
(Manager of Education)

June 2012