Application Deadline: Postmarked by November 1, 2025

Dear Applicant and Family,

The Barry Wilson Memorial Fund was created by family and friends in the name of Barry Wilson after his passing in May 2011. Having been the Stirling-Rawdon and District Recreation Center Manager for 25 years and an avid volunteer with the Stirling District Minor Hockey Association for 40 years, Barry enjoyed seeing every child play the sport he loved. The Barry Wilson Memorial Fund will assist in paying the registration costs for families who could use help to pay for their child to experience the sport of hockey, or figure skating.

Stirling District Minor Hockey House League, Rep players, and Stirling Figure Skating Club are welcome to apply. To apply complete the following application as per the guidelines outlined. Successful applicants will receive up to a maximum of 80% funding towards their Stirling District Minor Hockey, or Stirling Figure Skating registration fee. Applicants will be narrowed down based on a point system criteria set out by The Barry Wilson Memorial Fund Committee and the top ranked applicants will be entered in a lottery to determine the successful applicants.

It is the intent for The Barry Wilson Memorial Fund to allocate only the interest earned off the principle investment each year towards successful applicants' registration fees. For the 2025/2026 hockey, and figure skating season, The Barry Wilson Memorial Fund will assist approximately 4 to 6 children.

Please direct any questions or concerns to thebarrywilsonmemorialfund@live.ca

Sincerely,

The Barry Wilson Memorial Fund Committee

Further information on Application Guidelines and Liability can be found on page 7.

APPLICATION FORM

Application Deadline: Postmarked by November 1, 2025

Eligibility Criteria

- Applicant's primary address must be within the Stirling District Minor Hockey Association boundaries. While there are no boundaries for House League participation, to be eligible for The Barry Wilson Memorial Fund the applicant must reside within the Stirling District Minor Hockey Association boundaries as used for determining rep eligibility.
- Applicants for Stirling Figure Skating Club must be registered with this club.
- Funding will be provided for registration costs only.
- Payment will be made directly to Stirling District Minor Hockey Association, or Stirling Figure Skating Club.
- Payment will be made once proof of registration is provided by Stirling District Minor Hockey Association, or Stirling Figure Skating Club.
- If the applicant withdraws and refunds are issued by Stirling District Minor Hockey Association, or the Stirling Figure Skating Club the refund will be at the same ratio as originally paid by the applicant and The Barry Wilson Memorial Fund.
- Incomplete or late application forms will not be processed.
- Only successful applicants will be contacted.
- If parents are applying for multiple applicants within the same family all applicants' information can be added to one application form. See space provided for additional applicants.

How to Apply

Forms will be available to download and print online from www.stirlingblues.ca, www.stirlingskate.ca,or can be picked up at the Stirling-Rawdon and District Recreation Center. Completed forms must be mailed to the below address. No e-mail, fax, or hand delivered applications will be accepted. Only those received through mail postmarked by the application deadline will be accepted. Please ensure applications are typed or printed legibly.

Mail completed forms to: Mrs. Kathy Wilson
P.O. Box 1291 Stirling ON.
K0K 3E0

APPLICATION FORM

Application Deadline: Postmarked by November 1, 2025

Please complete all sections of the application form. Failure to complete all sections will result in an incomplete application form that will not be processed.

Section One:

Applicant Information (First Child)

Full Name:	
Date of Birth:	Sex: Male____ Female____
Address: Street_____ City:_____ Province_____ Postal Code_____	
Mailing Address (If different from above): _____ _____ _____ Telephone: Home:_____ Alternate:_____	
Type of Hockey: House League___ Rep___	
Hockey Level: Tyke___ Atom___ Novice___ PeeWee___ Bantam____ Midget___ Juvenile___ Figure Skating Level: Pre-Can & Can Skate____ Pre Power ____ Can Power _____ Star Skate _____	

Applicant Information (Second Child – If Applicable)

Full Name:	
Date of Birth:	Sex: Male____ Female____
Address: Street_____ City:_____ Province_____ Postal Code_____ Mailing Address (If different from above): _____ _____	
Telephone: Home:_____ Alternate:_____	
Type of Hockey: House League___ Rep___	
Hockey Level: Tyke___ Atom___ Novice___ PeeWee___ Bantam____ Midget___ Juvenile___ Figure Skating Level: Pre-Can & Can Skate _____ Pre Power _____ Can Power _____ Star Skate _____	

Applicant Information (Third Child – If Applicable)

Full Name:	
Date of Birth:	Sex: Male____ Female____
Address: Street_____ City:_____ Province_____ Postal Code_____ Mailing Address (If different from above): _____ _____	
Telephone: Home:_____ Alternate:_____	
Type of Hockey: House League___ Rep___	
Hockey Level: Tyke___ Atom___ Novice___ PeeWee___ Bantam____ Midget___ Juvenile___ Figure Skating Level: Pre-Can & Can Skate_____ Pre Power _____ Can Power _____ Star Skate _____	

<u>Section Two</u>: Parent/Guardian Information

Parent/Guardian "A"	Parent/Guardian "B"
Full Name:	Full Name:
Address: Street_____ City:_____ Province:_____ Postal Code:_____ Mailing (If different from above): _____ _____ _____	Address: Street_____ City:_____ Province:_____ Postal Code:_____ Mailing (If different from above): _____ _____ _____
Home Telephone:_____ Alternate Telephone:_____	Home Telephone:_____ Alternate Telephone:_____
Income: **___ under $20,000.00** **___between $20,000.00 & $30,000.00** **___between $30,000.00 & $40,000.00** **___over $40,000.00**	**Income:** **___ under $20,000.00** **___between $20,000.00 & $30,000.00** **___between $30,000.00 & $40,000.00** **___over $40,000.00**
Have you applied for or received any other funding from other sources for this applicant's participation in hockey or figure skating? (Example: Playing For Keeps Foundation, Government subsidies, etc.) Yes_____ No_____ If yes please explain:	
How many children in the applicant's family are playing organized sports? _____	
Have you received previous funding from the Barry Wilson Memorial Fund? Yes_____ → Year_____ No _____	

Section Three:

In approximately 250-500 words please answer the following question.

What benefit would the applicant/ family get from receiving support from The Barry Wilson Memorial Fund? Please attach on a separate piece of paper or write on the back of this page.

Section Four: Check List

Please ensure the following pieces are included in your application. Failure to provide all of the following will result in an incomplete application that will not be considered for funding.

1) **Completed Application Form Sections 1-3.**
2) **Signed Application Guidelines and Release of Liability form.**

Section Five: The Barry Wilson Memorial Fund Committee Use Only

Date Received:	Application #
Committee Decision: Date:	Amount Approved:

APPLICATION GUIDELINES

I understand and agree that:

a) The Barry Wilson Memorial Fund Committee (the Committee) will use its best efforts to ensure all information provided in this application will be kept confidential. Completed applications will be kept in a secure location. All unsuccessful applications will be destroyed by the end of December in the application year. Successful applications and the top three runners up will be kept on file.
b) All applications will be filed by applicant and Parent/Guardian for future tracking on a log sheet if required. The log sheet will be kept in a secure location with the applications.
c) The Committee will not disclose the identity of any successful applicant(s) to any media source without permission first being obtained from the applicant's Parent/Guardian.
d) The Committee must disclose the successful applicant(s) identity to the applicant's Parent/Guardian, to the Stirling District Minor Hockey Association Executive, and or to the Stirling Figure Skating Club who will also keep that information confidential.
e) I have thoroughly read, understand and agree with the Application, including the Application Guidelines.
f) All information provided in this Application is true, to the best of my knowledge and belief.

_____ _____
Parent/Guardian 'A' Date

_____ _____
Parent/Guardian 'B' Date

RELEASE OF LIABILITY

I will not hold the Committee, including their respective heirs, administrators, trustees and assigns, liable for any loss or damages suffered directly or indirectly

a) in the event illegal activity not committed by the Committee results in disclosure of application information,
b) should a person related to or associated with the applicant or the applicant's family disclose any information from the application,
c) should the executive of the Stirling District Minor Hockey Association, or Stirling Figure Skating Club disclose any information concerning the successful applicant(s),
d) should my child be injured while playing hockey, or participating in any program connected to Stirling Figure Skating. Club.

_____ _____
Parent/Guardian 'A' Date

_____ _____
Parent/Guardian 'B' Date

Barry Wilson Memorial Fund