



CHRISTCHURCH JUNIOR CRICKET ASSOCIATION

CJCA PLAYER AND FAMILY SUPPORT FUND

Application Form

Players Name- _____
 DOB - _____ Age _____
 Phone Number - _____
 Guardians - _____
 School - _____
 Address - _____
 _____ Post code _____

Which club/school do you intend to register for in 2020/21

What grade do you intend to play? _____

PARENT/GUARDIAN

I agree to the conditions of assistance

Signature of parent(s)/guardian(s)

 Date _____

Please post to or email

CJCA PLAYER AND FAMILY SUPPORT FUND
 C/ CJCA, PO Box 36-701
 Merivale, CHRISTCHURCH
 or scanned and emailed to gm@cjca.org.nz

OFFICE USE ONLY

Application considered-

Decision-

Applicant advised -

Club/Payment arranged-

Fees reduced -

Support Person

Name of Club/School/Agency - _____

Role in Club/School/Agency - _____

I hereby endorse the application for

NAME OF PLAYER - _____ for assistance from the **CJCA Player & Family Support Fund**

Brief outline of relevant family circumstances:		
PURPOSE OF ASSISTANCE (state full fees & assistance requested)		Requested support
CJCA Winter Training Fees	\$125	
Club/School Fees		
CJCA Spring Tournament Fee	\$60	
January Festivals	\$60	
South Island Boys (if selected)	\$350	
South Island Girls (if selected)	\$90	
2021 CJCA Summer Tournament Fee	\$60	

SUPPORT PERSON CONTACT DETAILS

Name: _____

Email: _____

Address: _____

Postcode: _____

Phone _____

I agree that, to the best of my knowledge, the applicant is worthy of the assistance applied for and will make strong efforts to remain involved in cricket as a result.

Signature _____ Date _____