

Date _____



Prince Edward Island Athlete Assistance Program 2025-2026

ACKNOWLEDGEMENT AND WAIVER FORM

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

Acknowledgement and Waiver Form 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 the Division of Sport, Recreation and Physical Activity have given me no assurances and made no representation in this regard. I will not make any claim against Sport, Recreation and Physical Activity regarding my amateur status.

Athlete's Signature

Signature of 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.**

<p>NOTE: Due to availability of funding in any fiscal year, the Division of Sport, Recreation and Physical Activity reserves the right, without prior notification, to limit the amount of funding to any sport/athlete.</p>

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 Fisheries, Tourism, Sport & Culture
PO Box 2000
5th Floor, Shaw North
Charlottetown, PE C1A 7N8