



# APPLICATION FORM

**PARALYMPIC SPORT DISCOVERY DAYS  
2026-27**

# Application form



## GENERAL INSTRUCTIONS

### ***Before Completing Your Application:***

1. Read through the Paralympic Sport Discovery Days Guidelines available at: <https://paralympic.ca/funding-opportunities> and ensure your organization meets the basic eligibility requirements.

### ***When you are ready to apply:***

Please read each question carefully and answer completely. There are four main sections to complete as well as required documents to provide:

2. **Part A:** Organizational Information should be filled out with details pertinent to your organization or club.
3. **Part B:** Project Information should be filled out with details about the specific program or initiative that will use the funding.
4. **Part D:** Financial Information should include both funding allocated from CPC as well as organizational or external sources (if applicable). You are required to distinguish how CPC funding will be used.
5. **Part D:** The application main contact should complete the application checklist and sign on behalf of the organization.
6. Prepare your organization's financial statement summary from the most recently completed operational year, or a letter of endorsement from your organization's financial representative.

### ***When you are ready to submit your application:***

7. Upload the completed application, along with financial statements, the letter of endorsement and other supporting documents if applicable (yearly training plans) to the online form available at <https://paralympic.ca/funding-opportunities>. Please ensure all documentation is complete before submitting the online form.



# APPLICATION FORM

## **PART A: ORGANIZATIONAL INFORMATION**

- 1. Organization Name:**
- 2. Eligibility of Organization:**
- 3. Parasports offered by your organization (List all that apply for both summer and winter sports).**
- 4. What is your organization's mandate and mission? Provide 1-2 sentences from an existing organizational constitution, or a brief description of why your organization exists:**



5. Describe your organization's typical activities including programs and resources. When describing your activities, please make specific mention of the organizations you regularly partner with.

**Note:** You can include activities for both para and non-para-athlete programming but be sure to distinguish which is which.



6. **Who participates in your organization's activities or programs? Please describe your membership. Provide an approximate breakdown of membership by: age, role (athlete, coach, sport assistant etc.), impairment type (visual/sensory, physical or intellectual), level of training/competition, etc. If you are applying for funding for an individual athlete or training group, you will be asked for more details on their training plan later in the application.**

**Note:** *You may include members for both para- and non-para members but be sure to distinguish which is which. Be honest about your numbers: The Review Team has a strong understanding of the Para sport environment and understands that low numbers do not necessarily reflect the strength or quality of the program.*



**PART B: PROJECT INFORMATION**

**7. Project Name:**

**8. Sport(s) included in your project:**

**9. Anticipated Project Start and End Date:**



**10. Describe the program or initiative for which you will be using the funding. Please include the following information:**

- *Main goal and key activities of the initiative, including anticipated timelines for each activity*
- *Clearly outline the sport-specific pathway identified*
- *Explain how para sport eligibility and classification information will be discussed with participants.*
- *Be specific in describing your target athlete(s) for this event. Is it initial athlete ID, transfer athletes, or both*



**11. Please list the delivery partners involved in your project and the nature of your relationship with each partner. Please specify if you are collaborating with your sport's NSO, DSO, or PSO and their role within the project.**

**National Sport Organization (NSO) Partner:**

Role in Project (if applicable):

Contact Name, Email and Phone Number:

**Provincial Sport Organization (PSO)/Disability Sport Organization (DSO) Partner:**

Role in Project (if applicable):

Contact Name, Email and Phone Number:



Other Delivery Partners (municipal, community, service providers etc.):

Organization Name	Role in Project	# Years Working with Partner



**12. Include specific plans for how athletes will be connected with clubs, PSOS/DSOS and NSOS Please include a potential communication plan for post event follow up.**



**13. Include a promotion plan for your event and partners you will outreach to (example: schools, rehab hospitals, local sport organizations/ clubs)**



**PART C: FINANCIAL INFORMATION**

Please detail your entire project budget but be sure to separate expenses that will be covered by CPC and those that will be covered by additional revenue sources. Projects with diverse revenue sources may receive a higher priority for funding. Applicants may attach their own budget template for the project but must include the same level of detail as the one below. The maximum amount that can be requested is \$20,000.

REVENUES	BUDGET
<i>Insert all revenue sources:</i>	<b>Amount</b>
CPC Paralympic Sport Discovery Days	\$
	\$
	\$
	\$
<b>Total Project Revenues</b>	\$
EXPENSES	
<i>Insert all project expenses:</i>	<b>Amount (\$)</b>
<b>Expenses to be covered by CPC Funding:</b>	
<i>Example: Coach salary 25hrs @ \$25/hr (CPC Grant)</i>	\$625
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>Total Expenses (covered by CPC)</b>	\$
<b>Expenses to be covered by additional funding sources:</b>	
	\$
	\$
	\$
	\$
	\$
<b>Total Expenses (covered by additional revenue sources)</b>	\$
<b>Total Project Expenses</b>	\$



**PART D: FINAL CHECKLIST**

Please ensure that the following documentation is completed and uploaded to the online application form.

**I HAVE REVIEWED THE GRANT GUIDELINES, AND MY APPLICATION IS ELIGIBLE UNDER THE 2026-2027 PARALYMPIC SPORT DISCOVERY DAYS GUIDELINES.**

**I HAVE NOTIFIED MY NSO OF MY PARALYMPIC SPORT DISCOVERY DAY, AND THEY HAVE GIVEN THEIR ENDORSEMENT THAT IT IS ALIGNED WITH THE SPORT-SPECIFIC PARALYMPIC PATHWAY. PLEASE NOTE THAT APPLICATIONS WILL BE REVIEWED BY THE RESPECTIVE NSO.**

**THE PARALYMPIC SPORT DISCOVERY DAYS APPLICATION FORM IS COMPLETE.**

**A FINANCIAL STATEMENT SUMMARY FROM THE MOST RECENTLY COMPLETED OPERATIONAL YEAR, OR A LETTER OF ENDORSEMENT FROM YOUR ORGANIZATION'S FINANCIAL REPRESENTATIVE IS COMPLETE (SUCH AS A TREASURER).**

**I HAVE CREATED A COMPREHENSIVE PLAN OUTLINING HOW ATHLETES WILL BE LINKED WITH CLUBS, PSOS/DSOS, AND NSOS.**

**I HAVE DEVELOPED A PROPOSED COMMUNICATION STRATEGY AND A MARKETING PLAN FOR THIS EVENT.**

YES

NO

I \_\_\_\_\_ (Name of Key Contact) confirm on behalf of  
\_\_\_\_\_ (Name of Organization) verify that the information submitted in this  
application is factual.

Signature \_\_\_\_\_

DATE \_\_\_\_\_