



Coach Assistance Program Follow-Up Form

Recipients of the Coach Assistance Program must complete and submit this follow-up report no later than 30 days upon conclusion of the event in order to receive reimbursement of eligible expenses.

Name of Coach: _____

Address: _____

Telephone: _____ Email: _____

Name of the event for which the funding was approved:

Did you successfully complete the event? _____

How will attendance at this event benefit:

You: _____

Your Community: _____

Your Sport: _____

Proof of Attendance

*Have the event facilitator complete this section or attach a copy of your event completion card

I _____ hereby certify that _____ attended
Facilitator Name Event Participant

the _____ on _____
Event Name Date

Authorized facilitator signature X

Expenditures:

Please list all expenditures incurred at this event. Please include photocopies of the expenditures.

Expenditures – Actual	Cost
Travel (return mileage @ \$.50./km)	
Accommodations (for multi-day events, maximum payable \$120)	
Total Actual Expenditures:	

I certify that the information provided in this follow-up report is a true and accurate account of the expenditures incurred while attending the approved event:

Authorized signature Date

Reimbursement by cheque or e-transfer to: _____
Email

Please ensure that all sections are complete before returning the completed form to:

Prairie Central District for Sport, Culture & Recreation Inc.

P.O. Box 370, Southey, SK., S0G 4P0

Attention: Aileen Martin

Email: aileen@prairiecentral.ca Fax #: 306-726-2052

For Office Use Only:	
Date received: _____	Follow-up approved: _____
Amount approved: _____	Cheque #: _____
More information required: _____	