

# MANOO AND JEAN GURJAR LEGACY FUND APPLICATION

Water Ski and Wakeboard Canada



## APPLICANT INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		Prov	Postal Code	
Phone		E-mail Address		
Age as at January 1:				
Are you a citizen of Canada?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Are you currently a student?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes: a) school name:
What is your grade point average or average mark?			b) what grade/year:	

## EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

## ABOUT YOU

*Please tell us how you exemplify the following qualities that reflect your:*

Love and passion for the sport of water skiing:

Sociability and friendliness within the water ski community:

Good sportsmanship:

Giving back to the sport:

Commitment to education:

Commitment to training and improvement:

Potential and drive to compete at the National Championships or higher:

Please list the sanctioned competitions you participated in during the previous season:

## **YOUR SKIING**

Where do you ski:

Who are your coaches:

Who are your skiing partners:

What events do you ski:

Slalom

Trick

Jump

Your personal bests:

Sociability and friendliness within the water ski community:

Slalom:

Trick:

Jump:

#### AGREEMENT AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge and that I am prepared to fulfill Legacy Fund requirements.

Signature

Date

If under 18:  
Parent Name

Signature

**\*\*Please submit completed application no later than May 1\*\***

**Please submit to:**

Water Ski and Wakeboard Canada  
210-223 Colonnade Road S  
Ottawa, ON K2E 7K3

Email: [wswc@waterski-wakeboard.ca](mailto:wswc@waterski-wakeboard.ca) Fax: 613-526-4380