## Wezer Bridle Memorial Volleyball Support Fund

Wezer Bridle was an ambassador, an icon and a founder of the sport of Volleyball in Manitoba and in Canada. Wezer was active in building the sport from the 1950's through to his passing in January of 2015. He was included in the first class of inductees into the Volleyball Manitoba Hall of Fame in 1999 as well as the Volleyball Canada Hall of Fame in 2000, and was inducted into the Sports Manitoba Hall of Fame in 1988.

The Wezer Bridle Cup is an annual tournament started in 2016 by Volleyball Manitoba and the Winnipeg Men's Volleyball League, raising funds towards this Support Fund named in his memory. The fund, along with the tournament, are an opportunity to celebrate his life and recognize his life-long contributions to the sport of volleyball.

The Wezer Bridle Volleyball Support Fund provides assistance towards volleyball participation fees to young athletes with financial barriers.

## **Fund Information**

- Financial Assistance (maximum of \$500) will be available to successful applicants who face financial barriers to participating in volleyball. Number of athletes supported each year and amount of support will depend on available funds.
- 2. Recipients must be members of Volleyball Manitoba and funds are intended to support volleyball related participation costs (ie. provincial team, club fees, camps, etc.).
- 3. There are two general application intakes each year: (1) February 28 with funding decisions determined by the end of March, and (2) May 30 with funding decisions to be determined by the end of June.
- 4. A letter of reference from a community member outside of immediate family that would outline the need for financial assistance is required as part of the application.
- 5. Funding cheques will be issued to families upon confirmation of program registration.
- 6. Names of successful recipients will not be publicized, all application information will be kept confidential.

Application Information		
Child's Last Name:	First Name:	
Mailing Address:		
City:	Postal Code:	
□ Male □ Female Age:	Date of Birth (YYYY/MM/DD):	
Parent / Guardian Last Name:	First Name:	
Telephone: (h) (c)	(w)	
Email:		
Relationship to Child (ie. Parent/Guardian/other):		
Parent / Guardian Signature:	Date:	

Sport Information		
Program Name (ie. Team / Club / Camp etc.):		
Contact Person:	Position:	
Mailing Address:		
City:	Postal Code:	
Phone: Email:		
Program Registration Fee: \$	_	
Program Dates: Start	End	
Number of Days Per Week:	Length of Session Each Day:	
Sport Program Signature:	Date:	
Application		

Please complete this application and along with letter of reference, send to the following by mail or email:

Volleyball Manitoba 412 – 145 Pacific Avenue Winnipeg, MB R3B 2Z6 Email: volleyball.ed@sportmanitoba.ca