**Whistler Sport Legacies** 



# **ATHLETE APPLICATION FORM**

The late John Heilig was one of the most passionate people in the Sea to Sky region for all Nordic sports, especially when it came to the disciplines of Ski Jumping & Nordic Combined. John was known all over the world for his knowledge and expertise in these two disciplines, and was the go-to person when major international events were being planned.

John was a key member of the team during the 2010 Olympic and Paralympic Winter Games, after the Games he became the Sport Manager at Whistler Olympic Park. During his time with Whistler Sport Legacies John focused on introducing new participants to the Nordic sports and advocating for all Nordic disciplines. He loved being on the snow, always passing on his knowledge whether teaching fundamentals to beginners or providing technical advice to seasoned athletes, or when working on sport events and program delivery.

The John Heilig Bursary has been put in place by Whistler Sport Legacies to honour John's passion and his commitment to winter sports, and to continue his efforts in developing the next generation of Olympians/Paralympians. Two \$2,500 bursaries are awarded annually to two deserving athletes. These funds are to assist athletes on their journey towards becoming a high-performance athlete to represent Canada.

This application will ask the following from bursary applicants:

- Athletic History (sports played, awards and achievements, best results, athletic background etc.)
- Short Essay describing what you hope to accomplish in sport and how the John Heilig Bursary will help you in achieving your goals
- One Letter of Recommendation from your coach outlining the coach's endorsement of you as an athlete (i.e. work ethic, attitude, and what you would bring to the program etc.)

## **SECTION 1: Your Eligibility**

Eligible athletes must be Canadian citizens, based in the Sea to Sky region, between the ages of 16 to 25, recognised as a development athlete by a Provincial or National Sport Organization in Cross County Skiing, Biathlon, Ski Jumping, Nordic Combined or Para Nordic Skiing. Please note that you will be required to provide evidence for any criteria you claim to meet.

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- □ I am a Canadian citizen
- □ I am a registered athlete in good standing with my respective National Sport Organization representing Canada
- □ I am based in the Sea to Sky
- □ I am recognized as a development athlete by my respective provincial/national sport organization
- □ I am committed to the pursuit of personal and performance excellence in my sport and life
- □ I intend on competing and training for at least the next year

### **SECTION 2: About You**

Athlete	First Name:	Other Name(s):
	Last Name:	
	Full Address:	
	Date of Birth YYYY/MM/DD:	Gender: 🗌 Male 🛛 Female 🗌 Other
	Specify your current school, college or university and year	
	(if applicable):	
	Home Phone #:	Mobile Phone #:
	Email:	
	Club Affiliation:	
	Provincial Affiliation:	
	Who is your Lead/Head Coach:	
	Lead/Head Coach Phone Number:	
	Lead/Head Coach Email Address:	
	Level of Performance (please check one):	High Performance Provincial
		Provincial Team
		Provincial Squad
		National
	Years on Provincial Team/Squad:	

		Mother/Guardian	Father/Guardian
t/ an	Name:		
di	Mobile Phone #:		
Pare Guar	Address (include postal code):		
	Email:		

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## **SECTION 3:** Your Sporting Performance and Goals

- A. Use this space to tell us about your sporting performance. This should include:
- Any performances in national and international competitions, including the name, date and location of each event and your result or placing
- Any national rankings achieved
- ✓ Any regional or national teams or squads you have been selected to represent
- ✓ Other sporting activities, volunteering and interests

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- B. Use this space to tell us about your personal sporting goals over the next two years.
- ✓ Performance at national or international competitions
- ✓ Retaining or improving national rankings
- ✓ Selection for regional or national teams/squads

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## **SECTION 4:** Applicant/Parent or Guardian Declaration

It is essential that you understand and agree to the following statements. Failure to do so may influence future support opportunities.

I certify that the information contained in this application is correct. If the information changes in any way, I will inform Whistler Sport Legacies at the earliest possible convenience.

Applicant (person completing this application)	Parent/Guardian (If applicant is under 18 years of age)
I agree to the above terms and conditions.	I give my consent for my son/daughter to submit this application.
Signature:	Signature:
Print Full Name:	Print Full Name and Relationship to Applicant:
Date:	Date:

## **Applications submissions May 1<sup>st</sup> – August 31<sup>st</sup> 2025**

# Notification of awarded by – October 1<sup>st</sup> 2025

## **SECTION 5: Attachments**

Please attach a coaches' letter plus any necessary documents to support your application.

