



Athletics Manitoba Annual Coach Funding Claim Form

Name:					
Mailing Address:					
City:					
Postal Code:					
Email Address:					
Indicate the following information for all athletes that have achieved the top Performance Pathway standard in their age category					
	Athlete 1	Athlete 2	Athlete 3	Athlete 4	Athlete 5
	ATHLETE NAME:				
	Event:				
	Performance:				
	Date Achieved/Meet Name:				
	Link to meet results:				