The Coach Sauer Foundation Opportunity Grant Program

The sport of hockey gave Coach Jeff Sauer tremendous opportunities on and off ice. Throughout his more than 40 years coaching hockey, 'Coach' worked tirelessly to pass this experience on and help others using the game he loved. The Foundation is dedicated to carrying this spirit forward by expanding opportunities to play the game of hockey and support programs, both able-bodied and disabled, that emphasize the development of youth hockey players, coaches, and officials.

The purpose of the Coach Sauer Foundation Opportunity Grant program is to grow the game of hockey by providing financial help to players and organizations to expand accessibility and provide new experiences. Non-profit hockey associations, ice arenas, and other organizations are invited to apply for financial support to enable the execution of their plans to increase opportunities for youth participation and enjoyment of the game of hockey. The Foundation seeks to support both able-bodied and disabled athletes, coaches, and officials from across the state or country. Specific areas of interest include, but are not limited to:

- Subsidies for player equipment, registration, or other participation fees.
- Support for the procurement of training equipment to enhance the effectiveness and player enjoyment of practices.
- Support for tournaments, clinics, or other events to promote participation and skill development.
- Subsidies for education or training fees for coaches, officials, or other association members.
- Support of efforts to increase participation from under-represented demographic groups or geographic regions.

Applications will be reviewed by the Coach Sauer Foundation Grants Committee and evaluated on the basis of potential impact, targeted demographics, geographic area to be served, funds availability, and other factors. Typical award values are expected to be in the \$500 to \$1000 range, but will be evaluated on a case-by-case basis.

Completed applications for the 2019-2020 season must be submitted by September 15, 2019 to be considered for funding. Applicants will be notified of funding decisions by October 7, 2019. Completed application forms can be submitted by either email to coachsauerfoundation@gmail.com or U.S. Mail to The Coach Sauer Foundation, P.O. Box 620435, Middleton, WI 53562-0435.

Coach Sauer Foundation Opportunity Grant Application – 2019-2020 Season

Completed applications must be postmarked by September 15, 2019

Organization Information		
Legal Name:	Tax ID:	
Tax Exempt Status/IRS Designation:		
Street Address:		
City:	State:	ZIP:
Website/Social Media:		
Contact Information		
Name:	Position in Organization:	
Telephone:	Email:	
Street Address:		
City:	State:	ZIP:
Website/Social Media:		
Proposed Idea		
Title of Proposal:		
Detailed description of the idea you are v	vishing to implement:	
Be specific in terms of <u>who</u> will bene	efit and <u>when</u> the propose	ed program will be conducted.

Impact and Objectives
What impact do you expect from this effort?
Describe two or more specific objectives of the proposed effort:
Collaboration and Sustainability
Describe other entities with which you may collaborate to support the implementation of the
proposed idea (funding, in-kind donations, volunteer support, recruitment, advertising, etc.) and the benefits of these collaborations.
While there is no requirement to collaborate, collaboration may strengthen your submitted proposal.
Is implementation of the proposed idea contingent on receiving funding? Yes / No
How does the organization plan to sustain the proposed idea after grant funds are exhausted? While one-time efforts are permitted, plans for sustainability may strengthen your submitted proposal.

<u>Budget</u>			
Provide a detailed list of income and expenses you wincluding any anticipated fees from participant enrolling			
Income	\$ Amount		
Total Income			
Expenses	\$ Amount		
Total Expenses			
Net Income/Expenses	\$ Amount		
(Total Income – Total Expenses):			
Opportunity Grant Funding	\$ Amount		
Grant Funds Requested	ψ miount		
Budget Notes/Assumptions: (Optional)			
Organization Approval			
Name of Approving Officer (Please Print):			
Signature of Approving Officer:	Date:		