



300-1734 Elphinstone Street, Regina, Saskatchewan  
Tel: 306-780-9244 | [www.saskhorse.ca](http://www.saskhorse.ca)

## 2026 Coaches Assistance Grant Application/Follow Up

*The purpose of this grant is to assist those individuals actively seeking accreditation in the Coaching Certification Program of equestrian coaching to attend upgrading sessions not offered in Saskatchewan in the year of application. Successful applicants must demonstrate that such courses will benefit the equestrian community as a whole and be prepared to assist the SHF with activities within the Province if called upon to do so. Preference will be given to those applicants aligning with National Coaching Certification Program NCCP Stream. Individuals must submit proof that they have successfully completed "Respect in Sport" with Sask Sport. At this time, Online Education registration fees only, will be recognized.*

Applicant: \_\_\_\_\_ SHF #: \_\_\_\_\_  
(Mandatory)

Address: \_\_\_\_\_ Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Coaches Qualifications (please list cards held; divisions and disciplines):

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### Event Information:

Event/Clinic/Seminar: \_\_\_\_\_

Date/s in attendance: \_\_\_\_\_ Location: \_\_\_\_\_

Certification or Accreditation earned: \_\_\_\_\_

Provide a brief overview of the Course/Certification: \_\_\_\_\_



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Note: **Eligible Expenses:** Fuel/Gas, Hotels, Course Fees  
**Ineligible Expenses:** Meals, Beverages, Alcohol

**EXPENDITURES:**

Course Fees	\$ _____	
Transportation	\$ _____	
Accommodations	\$ _____	
Other (specify)	\$ _____	Total _____

**The dollar amount received will be determined upon review of this application.**

- **Copies of receipts** to verify eligible expenditures must be included with this application, as well as a copy of "Respect in Sport" certificate.
- A report that does not include receipts is considered "**incomplete**" and payment will not be issued until all requirements are fulfilled.
- **Deadline is October 31, 2026.**

I hereby certify the information provided in this report is correct and factual.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit by email to: [office@saskhorse.ca](mailto:office@saskhorse.ca)  
Subject line must be: **Officials Assistance Grant**

