



# PROGRAMMES D'ÉCHANGE D'AMITIÉ DU SPORT DU CANADA

CANADA SPORTS  
FRIENDSHIP EXCHANGE PROGRAMS

**RECIPROCAL CULTURAL EXCHANGES  
FOR YOUTH BETWEEN THE AGES OF 12-17**

## APPLICATION FORM

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Funded by the  
Government  
of Canada

Financé par le  
gouvernement  
du Canada

Canada

# CSFEP APPLICATION FORM

## 1. Group Identification

### **Name of school/ sport group**

Type of group:                      School-based                      Community-based

Street Address

City    Prov./Terr.    Postal code

Telephone  
Number    Extension

Fax Number

E-mail Address

Website

School board (for school groups)

### **Group Organizer**

First Name

Last Name

Home Address

City    Prov./Terr.    Postal code

Home phone #    Cell phone #

E-mail

Language of correspondence                      English                      French

### **Alternate contact**

First Name

Last Name

Home phone #    Cell phone #

E-mail Address

## 2. Group Profile

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Estimated number of participants:

Females

Males

Adults

Total

Age range of youth:

to

Main language of participants in the group:

English

French

Other \_\_\_\_\_

Can you be flexible in the size of group?

Yes

No

If yes, please indicate

minimum #:

maximum #:

Do you have previous experience in organizing an exchange?

Yes

No

Are you applying to any other Exchanges Canada delivery organization at this time?

Yes

No

If yes, which

## 3. Group Description

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Are you taking a pre-existing group (e.g. members of a grade 8 class, scout group, drama club, student council, sports team), or has your group been formed for the purpose of this exchange.

Pre-existing group

Group formed for this exchange

Group not yet formed

If forming a group strictly for the purpose of taking part in this exchange, how are you selecting the participants?

We encourage the participation of youth who have been traditionally under-represented in exchanges. Please indicate if your group includes youths who fall within the following categories:

- |   |  |    |  |
|---|--|----|--|
| Youth with Special Needs and/or Disabilities? | Yes                                      | No |  |
|   | If es, approximately how many in total?  |    |  |
| Youth from low-income households?             | Yes                                      | No |  |
|   | If yes, approximately how many in total? |    |  |
| Visible minority youth?                       | Yes                                      | No |  |
|   | If yes, approximately how many in total? |    |  |
| Aboriginal youth?                             | Yes                                      | No |  |
|   | If yes, approximately how many in total? |    |  |
| Youth from rural or isolated areas?           | Yes                                      | No |  |
|   | If yes, approximately how many in total? |    |  |

Other than regular transportation between your community and your twin community, do you expect to need any additional support to meet the needs of these participants (e.g., financial assistance for low-income participants, accessible home, etc.)?

Yes                      No                      Not sure

If Yes, please explain \_\_\_\_\_

What is the nearest major airport to your community

What is the distance (in km) between your community and this major airport?                      km

## 4. Exchange Description and objectives

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What is the primary educational focus of your exchange project:

Specify:

Are you applying for a bilingual exchange?            Yes            No

Is your group an Official Minority Language Community (OMLC) group? (At least 75% of participants are Francophone living outside of Québec or Anglophones in Québec)

Yes            No

If you are not an OMLC group, are any participants in your group members of an Official Language Minority Group?

Yes            No            If yes, approximately how many?

The objectives of CSFEP programs are:

- To develop a greater understanding of Canadian History and Heritage;
- To offer young Canadians opportunities to learn about Canada and to experience the cultural richness of our country;
- To foster appreciation of both the diversity and the shared aspects of the Canadian experience;
- To foster a strong sense of Canadian identity and pride;
- To help young Canadians connect to one another and create friendships and memories that last a lifetime.

If your group is selected to participate in the Canada Sports Friendship Exchange Programs, once you have been twinned, you will be asked to provide a detailed “Plan of activities” before, during and after the exchange. The next section aims at collecting your preliminary ideas, knowing that some activities might change once you begin to plan the exchange with your twin group.

Please check the activities that you are planning to include in your exchange program to achieve Exchanges Canada's objectives:

- Before the exchange *(Please check any that apply)*

Research home community

Research twin community

Develop joint project with twin group

Inform your community about the exchange

Encourage parents to communicate

Encourage participants to communicate by e-mail

Encourage participants to communicate by phone

Encourage group correspondence

Prepare introductory video

Fundraising

Create a Facebook page for the exchange

Specific plans \_\_\_\_\_

- During the exchange *(Please check any that apply)*

Develop group activities to encourage interaction among participants

Work on a joint project

Involve the community as a whole — potluck suppers, etc.

Visit local attractions

Schedule free time with families

Document the exchange through videos, journals, photos, etc.

Specific plans \_\_\_\_\_

- After the exchange *(Please check any that apply)*

Encourage participants to keep in touch by phone, mail or e-mail

Inform the community about the exchange — presentations, media coverage

Prepare scrapbooks and photo albums

Prepare presentation and deliver it to local schools, and school boards

Develop project website

Specific plans \_\_\_\_\_

## 5. Specific Requests (Optional)

Are you requesting a specific twin group?

If you are requesting a specific twin, please complete the following session. Both groups must apply separately to CSFEP, indicating that they wish to be twinned.

### Name of the Twin Group Requested

Street Address

City

Prov./Terr.

Postal Code

Telephone  
Number

Fax Number

### Twin Group Organizer

First and last name

E-mail Address

Telephone Number

### Exchange Dates

Preferred Travel Month

Preferred Hosting Month

If the specific twinning or location you have requested is not approved, will you consider other possibilities?

Yes

No

How did you hear about the CSFEP? \_\_\_\_\_

**Please note:** All groups applying to the program are considered individually for eligibility. Requesting a specific twin group does not change your group's eligibility. **CSFEP** must respect established provincial/territorial targets to ensure the equitable national distribution of the funds allocated to this exchange program. Requests for specific twinning or locations are considered in light of these provincial and territorial targets and budget limitations, once the eligibility of both groups has been determined.

Due to a high demand for exchanges, not all applications to the program will result in an approved exchange. CSFEP tracks all groups' history to ensure that everyone has equal access to the program.

## AGREEMENT OF GROUP ORGANIZER

In submitting this application, I, the undersigned acknowledge and agree that upon application approval and in consideration of the funding provided through Canada Sports Friendship Exchange Programs (CSFEP), I will assume the following responsibility, that;

I am a fully authorized representative of the youth group and have submitted the application in full knowledge and all necessary approvals from the school or organization;

I will fully inform parents and obtain parental consent for all aspects of the exchange;

I will establish and conduct safety procedures and information sessions;

I will ensure appropriate, safe, and secure home-stays or alternate accommodations for visiting exchange participants, and the participant's safety and security throughout the exchange;

I will ensure that all reference checks are carried out in accordance with the CSFEP policies;

I will Plan and carry out all aspects of pre-exchange orientation of participants, their parents and all others involved in the exchange, as well as all aspects of post-exchange follow-up;

I will ensure that CSFEP is kept fully informed on all aspects of the exchange and that I will reply to and provide CSFEP with any and all relevant information or documents concerning the exchange in a timely manner or as requested;

I understand that the travel arrangements between the two provinces of the twinned groups will be made through CSFEP, and the local transportation cost and other expenses while hosting the twin group, will be taken care of by host group;

I agree that my contact information could be shared with a potential twin organizer;

I am responsible along with my twin organizer for organizing all aspects of the exchange and will maintain regular and timely communication with him/her;

I will ensure that all participants and anyone else involved in the exchange execute a waiver of liability in favor of CSFEP in a form and content acceptable to CSFEP.

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Organizer's Name (please print)

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Date

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Organizer's Signature



# AGREEMENT OF SCHOOL/SPORT GROUP/ORGANIZATION

In submitting this application, the undersigned acknowledges and agrees that upon application approval and in consideration of the funding provided through the CSFEP, and as representative of the School / Sport group / Organization:

I accept responsibility at all times for the safety and security of all participants involved in the exchange, and ensure that the Group Organizer abides by the CSFEP's policies and procedures in accordance to the Organizer's Manual;

I will collaborate with the Group Organizer for planning and carrying out all aspects of pre-travel orientation of participants, the parents and chaperones involved in the exchange, as well as all aspects of post-travel follow up;

I will collaborate with the Group Organizer to ensure that information sessions will cover topics such as safety procedures, codes of conduct, responsibilities, timelines, and other pertinent information;

I will ensure to fully inform parents and obtain parental consent for all aspects of the exchange as applicable;

I will ensure that all deadlines are respected including but not limited to payments, waivers, all necessary documentation requested by the CSFEP;

I will ensure the CSFEP is kept fully informed of all aspects of the exchange and that CSFEP is provided with all relevant information or documents concerning the exchange;

The School / Sport Group / Organization shall fully indemnify and hold harmless the CSFEP and/or Board of Directors against any and all claims for loss, damage or injury of whatever kind or nature, in any way associated with or arising from the participation in the exchange, by the School or sport group / organization or its authorized employees, agents, organizers, participants, parents or anyone else, unless the claim arises from the negligence of the CSFEP, Her Majesty or their respective employees and agents. The School or Sport Group / Organization further acknowledges and agrees that neither it or its authorized employees, agents, organizers, participants, parents or anyone else is or shall become an agent of CSFEP. The School or Sport Group / Organization shall maintain at all times adequate public liability and property insurance coverage and shall provide CSFEP with proof of such coverage as required.

The School / Sport Group / Organization approves \_\_\_\_\_ as a Group Organizer and recognizes him/her as representative of the School / Sport Group/ Organization

\_\_\_\_\_  
Signature of Authorized Signing Officer of School / Sport Group/Organization  
(Must be different person than Group Organizer)

\_\_\_\_\_  
Date

Name (please print) \_\_\_\_\_

Telephone # \_\_\_\_\_

Title \_\_\_\_\_

E-mail \_\_\_\_\_

Name of School / Sport Group / Organization \_\_\_\_\_

# CHECK-OFF LIST

## REQUIRED FORMS PROVIDED FOR PARTICIPATION

APPLICATION FORM ⇐

AGREEMENT OF GROUP ORGANIZER

AGREEMENT OF SCHOOL / SPORT GROUP / ORGANIZATION

SAMPLE HOSTING ITINERARY

REGISTRATION FEE \$ 700.00