



Le groupe de compagnies Lorenzetti
The Lorenzetti Group of Companies

The Jim Stirling Scholarship Program

B.F.L Canada is retained as Insurance Broker for Hockey Canada. They are committed towards risk management, loss control objectives and assisting in making the game of hockey a safe and enjoyable sport. As longtime insurance brokers of Hockey Canada, BFL Canada provides each provincial branch with a \$1,000 scholarship in honour of their dear colleague and friend Jim Stirling who passed away in 2011.

A recipient will only be awarded this scholarship once during his/her post-secondary schooling.

Two \$500 Scholarships or one \$1,000 will be awarded to registered Hockey Northwestern Ontario ("HNO") hockey participants (player, official, coach, etc.) **currently attending a university/college program, during 2024-2025, and** who has, in the opinion of the Association, displayed a high degree of tenacity and dedication to his or her team/position combined with scholastic excellence. **The applicant must be returning to College or University in the fall of 2025.** The recipient(s) will be selected by an HNO Committee and will be announced at the Annual General Meeting held in June.

Payment will be issued upon receipt of proof of payment and attendance at a recognized University or College of your choice after August 31, 2025 and prior to December 31, 2025

Applications will be received until Friday, May 9, 2025. Please forward to:

***Hockey Northwestern Ontario
1224 Amber Drive
Thunder Bay, Ontario
P7B 6M5***

or info@hockeyhno.com

SUPPLEMENTARY INFORMATION

LIST HOCKEY TEAMS YOU PLAYED/COACHED FOR IN THE LAST FIVE YEARS AND THE POSITION PLAYED OR COACHING INVOLVEMENT. IF THE APPLICANT IS AN OFFICIAL, PLEASE DESCRIBE YOUR OFFICIATING INVOLVEMENT WITH HNO:

LIST OTHER SPORTS YOU PLAYED IN ORGANIZED GROUPS IN THE LAST FIVE YEARS, POSITION PLAYED AND NATURE OF GROUP:

LIST ANY EXTRA-CURRICULAR ACTIVITIES AND/OR VOLUNTEER WORK THAT YOU HAVE PARTICIPATED IN DURING THE LAST FIVE YEARS:

Signature of Applicant: _____

Date: _____

Signature of Parent/Guardian: _____
(required for those under the age of majority)

Date: _____