

TEAM CANADA ATHLETE APPLICATION FORM

FIRST NAME	
LAST NAME	
CKA MEMBERSHIP DATE*	
GENDER	
DATE OF BIRTH	
MAILING ADDRESS	
CITY	
PROVINCE	
POSTAL CODE	
PHONE NUMBER	
EMAIL ADDRESS	
COACH	
TEAM	
WEIGHT CLASS	
EVENT (BELL WEIGHT)	
World Championship** you would like to compete at:	

***CKA membership date must be within one (1) year of World Championship date to qualify for Team Canada at that event**

****It is the Athletes personal responsibility to understand and know the rules of the organization they wish to compete in, and that each organization may or may not have different rules.**