



PROVINCIAL SANCTION APPLICATION

Name of Applicant: _____

Applicant's Address: _____

hereby applies for the sanction of the AKBBA to hold a Tournament/Clinic/Camp (circle appropriate) named _____ on _____ at _____.

Event Chairperson: _____

Full Address: _____

The Applicant acknowledges having reviewed the AKBBA requirements for the event and agrees that the event will be conducted in accordance with those rules. The Applicant is a member of the AKBBA and understands that anyone taking part in the event in any capacity must be a current registered member in good standing with AKBBA.

First Aid: _____

Referee Committee notified: _____

Dated: _____

Signed: _____

Applicant's Signature

PROVINCIAL SANCTION PERMIT

This permit is issued subject to AKBBA rules and regulations for sanctioned events.

Permit Issued: _____

Sanction # _____

Technical Advisor: _____

Chief Referee: _____

AKBBA Chairperson: _____

Sanction Applications and payment can be sent to Helen Bienert at 53529 Range Road 224, Ardrossan, AB T8E 2L8. Email: homesteaders92@hotmail.com.