



judo alberta

THE ALBERTA KODOKAN BLACK BELT ASSOCIATION

TOURNAMENT SURCHARGE

The following fees are “per competitor”. Fees are not levied twice against competitors who enter in more than one category. For more information contact Helen Bienert at 780-998-3157 or e-mail registrar@judoalberta.com

of Competitors _____ x \$4.00 = _____

Cheque # _____ Cheque Date: _____

EVENT FORM

Event: _____

Club: _____ Contact Person: _____

Email: _____ Phone: _____

Date of the Event: _____

Sanction # (if applicable): _____

Please indicate the type of event that you hosted:

- | | |
|---|--|
| <input type="checkbox"/> Referee Clinic | <input type="checkbox"/> Provincial Training Camp |
| <input type="checkbox"/> Visiting Coach Clinic | <input type="checkbox"/> Interprovincial Training Camp |
| <input type="checkbox"/> Local Tournament | <input type="checkbox"/> Regional Tournament |
| <input type="checkbox"/> Provincial Tournament | <input type="checkbox"/> National Tournament |
| <input type="checkbox"/> International Tournament | <input type="checkbox"/> Kata Clinic |
| <input type="checkbox"/> Women’s Committee Event | <input type="checkbox"/> School/Mall Display |
| <input type="checkbox"/> Grading | <input type="checkbox"/> Other: _____ |

Number of:	From Alberta	Out of Province	International	Total
Athletes				
Coaches				
Referees				
Volunteers				
Other:				

If your event was for promotional purposes, please indicate the date, location, and approximate number of people who observed judo:

Did you hand out Promotional Materials? Yes No