

# EAST WEST CANADIAN QUALIFIER 1 – OCTOBER 28-29 2017

## RING SPORT KICKBOXING – SENIOR Athletes (19-39)

\*\*\* Make additional copies of registration form if needed.

Club: \_\_\_\_\_

Coach(es): \_\_\_\_\_

Indicate the total number of bouts each athlete has had in their experience category

Indicate 1<sup>st</sup>, 2<sup>nd</sup> choice (if applicable)

N	Last Name	First Name	<b>CASK Passport Code</b> <small>(DO NOT enter any athlete if you do not have this code. Only athletes that provide their 2016 code at the time of registration will be entered)</small>	M	F	Date of Birth (D/M/Y)	NOV	OPEN	PRESIGE CLASS	Weight Division (see below)	K1 (K1 Rules)	LK (Low Kick)
							0-10 bouts	11 + bouts				
1												
2												
3												
4												
5												

**ALL SECTIONS OF THE ABOVE REGISTRATION MUST BE COMPLETED. ALL ATHLETES MUST BE REGISTERED FOR 2017 WITH CASK AND REQUIRE A VALID CASK PASSPORT**

***I wish to pay by VISA \_\_\_\_\_ Master Card \_\_\_\_\_ (check one)***

Card #: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_ first \_\_\_\_\_ last

Amount authorized to charge - # Athletes \_\_\_\_\_ x \$75 / \$100 / \$125 = \$ \_\_\_\_\_  
*(Circle appropriate fee)*

*Athletes will be moved to another division, discipline or category if a bout is not available in their registered choice. Novice and Open class athletes maybe combined due to low numbers. No Refund Policy in effect - Athletes that do not receive a bout will receive a Credit to the next CASK Event. Date & Location of this tournament are subject to change.*

**Divisions:**  
 Females: Under 48; 52; 56; 60; 65; 70; Over 70kg  
 Males: Under 57; 60; 63.5; 67; 71; 75; 81; 86; 91; Above 91 kg

**Athletes from 2017 CASK Member Clubs**

**Register by Friday August 11<sup>th</sup> at Noon = \$75 per athlete**  
**Register by Friday September 8<sup>th</sup> at Noon = \$100 per athlete**  
**Register by Friday October 6<sup>th</sup> at Noon = \$125 per athlete**

**NO REGISTRATIONS ACCEPTED AFTER  
Friday October 6<sup>th</sup> at Noon (12pm)**

Please complete form accurately and email to [nhq@kickboxingcanada.org](mailto:nhq@kickboxingcanada.org) or **mail** with a certified check or money order to:  
**Council of Amateur Sport Kickboxing**  
**5008 South Service Road, Burlington, Ontario, L7L 5Y7**