



Registration form

Training at the Judo Ontario HPP/Judo Canada RTC

Please send all signed documents by fax or email to
Judo Ontario
Attention: Steven Sheffield, Sports Director
info@judoontario.ca

Arrival date: _____
Departure date: _____

Personal Information

Given Name _____ Surname _____

Date of Birth _____

Current Address _____

Phone Number _____ Email _____

Judo Club Information

Club _____

Address _____

Phone Number _____ Email _____

Emergency Contact Information

Name _____

Address _____

Phone Number _____ Email _____

Relation _____

Authorities

A) Likeness and Media Rights

I hereby authorise the Judo Ontario, CSI-ON, and Judo Canada to use my likeness for the Judo Ontario and Judo Canada website, for social media and for judo-related publicity.

Athlete Signature _____ Date _____

B) Declaration and Signature

I wish to be considered for admission or readmission in the Judo Ontario/Judo Canada Regional Training Centre. I declare that all the information presented on this application form is exact and complete. I understand that the Judo Ontario/Judo Canada Regional Training Centre reserves the right to modify or reverse any decision on the subject of my admission if any of the above information is inexact or incomplete. This application will not be accepted if any element remains inexact or incomplete.

Athlete Signature _____ Date _____

Please check the Program you are registering in.

- Judo Ontario Youth Academy
- Judo Ontario High Performance Program
- Veteran Training
- After School Program
- Judo Ontario Talent Development Camps