



Registration Form

Please fill out and hand form and fee to your Sensei
or mail to

Mid Canada Karate Tournament Circuit
1320 Rosslyn Road, Thunder Bay, Ontario. P7E 6W1
Make cheques payable to Victor Cooke

General Information: Please Print:

Dojo Name: _____ Senior Sensei _____

Dojo Governing Body _____ Dojo Style _____

Dojo Street Address _____

City _____ Postal Code _____

Dojo Web Site Address _____

Dojo E-Mail _____

Student Information: Please Print:

Last Name _____ First Name _____

Birth Date: year _____ month _____ day _____ Black Belt _____ Under Belt _____

Street Address _____

City _____ Postal Code _____

Phone Number (____) _____ - _____ Cell Phone Number (____) _____ - _____

E-Mail Address _____

Student Signature _____

Parent or Guardian Name (if student is under 18 years of age) _____

Parent or Guardian Signature _____

\$ 10.00 Registration Fee Paid: Cash _____ Cheque # _____ Payable to Victor Cooke