SKATECANADA ALBERTA-NVT/NUNAVUT

Return completed form and fees to:

SKATE CANADA: ALBERTA – NWT/ NUNAVUT

11759 Groat Road NW, Edmonton, AB, T5M 3K6
Toll Free: 866-294-0663 Toll Free Fax: 866-746-4981
Email: info@skateabnwtnun.ca

APPLICATION FOR SANCTION – CARNIVAL / ICE SHOWS/ EXHIBITIONS

APPLICATION REQUIREMENTS:

- SOCAN and Re: Sound requirements are the responsibility of the applicant/club/skating school
- Guest skaters for Carnivals/Ice Shows must have a consent letter from their Home Club. National Team
 Members must be sanctioned through the National Office by contacting Skate Canada info@skatecanada.ca
- A late fee of \$25.00 will be applied to all sanctions received into the Section Office less than 14 days prior to the event.
- Sanction applications not completed in full or without appropriate fee will not be processed/approved.

Applicant Organization Name/C	lub/Skating School:					
Date(s) of Event:	City:	Nan	ne of Event	(if applicable): _		
Contact Person:	Phone:	E	mail:			
lumber and Status of the skate	ers participating: #		igible [nateur)	Restricted (professional)	☐ Other (please provide a list	
Carnivals/Ice Shows/Exh ☐ Skate Canada Member ☐ Non Skate Canada mer	Club/Skating School	\$25.00 \$35.00				
Guest Skaters Name(s)	Home Club/Skatinç	Home Club/Skating School		Consent Letter Attached		
You may attach a complete list of qu	·		Card or (Cheque		
P/	AYMENT METHOD: Vi	isa, Master				
P/	AYMENT METHOD: Vi	isa, Master	iture:	·		
Name on card:	AYMENT METHOD: Vi	isa, Master Signa	iture:			
Name on card: Credit Card #: Postal code of card holder:	AYMENT METHOD: Vi	isa, Master Signa	uture:			
Name on card: Credit Card #: Postal code of card holder:	AYMENT METHOD: Vi	isa, Master Signa Expir	uture: y Date: ulberta-NWT.	/Nunavut.		
Name on card: Credit Card #: Postal code of card holder: Cr	AYMENT METHOD: Vi	isa, Master Signa Expir	uture: y Date: ulberta-NWT.	/Nunavut.		
Name on card: Credit Card #: Postal code of card holder: Ch	AYMENT METHOD: Vinceques are to be payable to Section number will be emailed	isa, Master Signa Expir	uture: y Date: ulberta-NWT, Person detai	/Nunavut.		
Name on card: Credit Card #: Postal code of card holder: Ch	AYMENT METHOD: Vinceques are to be payable to Section number will be emailed	isa, Master Signa Expir Expir kate Canada: A to the Contact	uture: y Date: ulberta-NWT, Person detai	/Nunavut. led above.		

REVISED March 2017