

# TRADITIONAL • AUTHENTIC • ORIGINAL



272 Richmeadow Road, London, ON, Canada N6H 5T3  
Tel: 519-719-7855 Email: [president.itftao.canada@gmail.com](mailto:president.itftao.canada@gmail.com)

## Event Application Form

### Applicant(s):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

School Name: \_\_\_\_\_

Submission Date of Application: \_\_\_\_\_

**Event Requested:** CAN-AM Tournament  
Friendship Tournament  
Seminar  
International Instructor Course

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

**Proposed Date of Event:** \_\_\_\_\_

### Proposed Location:

City: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Booked and confirmed?

Yes

No

<input type="checkbox"/>
<input type="checkbox"/>

**Describe Facility: (e.g. size, age, condition, flooring surface, spectator seating, parking, etc.)**

### Event Application Form

#### Insurance

Does this event require insurance?

Yes

☐

No

☐

If yes, have you obtained insurance?

Yes

☐

No

☐

List the insurance company \_\_\_\_\_

Estimated number of volunteers available: \_\_\_\_\_

Hotel Accomodations: \_\_\_\_\_

Land and Air Travel Accessibility: \_\_\_\_\_

Transportation provided:

Yes

☐

No

☐

(if yes, please explain)

\_\_\_\_\_

List nearby food services for competitors and spectators:

\_\_\_\_\_

Describe equipment available: (e.g. mats, breaking machines, ring supplies, etc.)

Event Sponsors (list all):

Confirmed:

\_\_\_\_\_

Proposed:

\_\_\_\_\_

Plans for Officials' Lunch:

\_\_\_\_\_

### Event Application Form

**Describe previous experience organizing and hosting events:**

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Your role in the event: \_\_\_\_\_

# of Participants: \_\_\_\_\_ # of Volunteers: \_\_\_\_\_ # of Rings: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Your role in the event: \_\_\_\_\_

# of Participants: \_\_\_\_\_ # of Volunteers: \_\_\_\_\_ # of Rings: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Your role in the event: \_\_\_\_\_

# of Participants: \_\_\_\_\_ # of Volunteers: \_\_\_\_\_ # of Rings: \_\_\_\_\_

**Other information of note:**

\_\_\_\_\_

**Application Fee:**

- |                          |                       |                             |
|--------------------------|-----------------------|-----------------------------|
| <input type="checkbox"/> | CAN AM Tournament     | \$100 paid with application |
| <input type="checkbox"/> | Friendship Tournament | \$100 paid with application |
| <input type="checkbox"/> | Seminar               | \$100 paid with application |
| <input type="checkbox"/> | IIC                   | \$200 paid with application |

- ☐ Cheque enclosed made out to "TAO Canada"  
Remit to: **272 Richmeadow Road, London, ON N6H 5T3**  
Note: Application fees refunded to unsuccessful applicants.

**Notes:**

The TAO Umpire Manual and the Tournament Rules and Regulations must be followed when hosting any Tournament or Championship. Failure to do so may result in future applications for events being rejected.

**Administrative Use Only:**

Date Received by TAO Canada: \_\_\_\_\_

Received by: \_\_\_\_\_

Event Application Cheque Received: Yes ☐ No ☐