ARNIS CANADA

INTERNATIONAL TRAVEL PERMIT

Place of Competition	State or Country	Date of Competition	Name of Competition	Name of Contact Abroad

Team Manager: _____ Registration #: _____
Coach: _____ Registration #: _____
Coach: _____ Registration #: _____
Official: _____ Registration #: _____

Athletes Name	Date of Birth	Club Name	Registration #

Provincial Association:

Approved by **Arnis Canada**

Approved by:

Name:

Title: