



OFFICIAL SANCTION REQUEST

PLEASE FORWARD TO PROVINCIAL SANCTION OFFICER FOR PROCESSING.

Name of Event: _____

Event Location (Name and Address): _____

Date(s) of Event: _____ Time(s): _____

THE UNDERSIGNED HEREBY MAKES APPLICATION to the Canadian Baton Twirling Federation (CBTF) for a Sanction to conduct the above event in accordance with the laws, Rules and Regulations of the CBTF. Please refer to the CBTF Technical Reference Manual & CBTF Competition Manual for further information.

Name of Organization Hosting the Event: _____

Event Director: _____ CBTF #: _____

Phone: _____ Email Address: _____

Please List: Clinician(s): _____

Adjudicator(s): _____

Course Conductor(s): _____

THE UNDERSIGNED DO HEREIN ENCLOSE the applicable SANCTION FEE made payable to the: Canadian Baton Twirling Federation. NOTE: A LATE FEE OF DOUBLE THE SANCTION AMOUNT will be charged for any competition requests that are received later than EIGHT (8) weeks before the date of the competition. NO EXCEPTIONS!

Fees apply to EACH event. Please select type of event. Payments are to be made via e-transfer to treasurer@cbtf.ca

No Charge	Lessons Seminars Conferences Closed or Studio Competition* (Type C)	Performances Adjudicator Course SDP Exams	Parades Coaching Course Fundraising Events	Demonstrations Judging Course Meetings
\$10 <small>per calendar day</small>	Clinic	Workshop		
\$30	Open Competition* (Type B)			
\$30	Open Competition* (Type B) with virtual options			
\$35	Provincial Championship* (Type A)			
\$35	Provincial Team Trials* (Type A)			
\$150	North American, International, Invitational Competition* (Type A)			

*Competitions are to indicate the phase type: _____

Signature – Event/Competition Director: _____

Signature - Provincial Chairperson or PSO: _____

FOR CBTF NATIONAL OFFICE USE ONLY	FOR PROVINCIAL OFFICE USE ONLY
Date Received: _____	Date Received: _____
Cheque #: _____	Cheque #: _____
Sanction #: _____	Sanction #: _____
Signature NSO: _____	Signature PSO: _____