

**2009 KEES CANADA CUP**  
**Saturday, June 6th, 2009**  
**Saskatoon, Saskatchewan, Canada**

**ATHLETE MEDICAL FITNESS FORM**

**This Form Must Be Completed Or Your Application To Compete Will Not Be Accepted**

**Personal Information**

First Name:	Last Name:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female    Age:	Date of Birth:    /    /    mm/dd/year
Home Address:	City:                      Province:                      Postal Code:
Telephone: (    )	Email:
Provincial Health Card or Medical Card #:	Expiry Date (if applicable):    /    /    mm/dd/year
Emergency Contact Name:	Phone: (    )

I fully understand that any medical treatment given to me during the 2009 Kees Canada Cup Taekwondo Championships will be by a licened medical doctor, EMT or Paramedic or certified First Aid Attendant. I hereby give permission that in case of emergency (in the opinion of a certified professional) that I may be transported at my own expense to the hospital by ambulance for further treatment as a precautionary measure.

**Medical Information**

1. Have you suffered a head injury, loss of consciousness, concussion or blow to the head in the past six months?  
 Yes     No
  
2. If you answered Yes, what symptoms did you have after the injury?

___ dizziness	___ blurred vision	___ amnesia	___ feeling in a fog
___ tingling	___ headache	___ irritability	___ ringing in the ears
___ numbness	___ nausea	___ vomiting	___ sensitivity to light
___ inability to concentrate			___ seeing flashing lights
  
3. Of the above symptoms, do you still experience any of these?  
 Yes     No
  
4. I hereby certify that I have not suffered a concussion, head injury, loss of consciousness or blow to the head followed by dizziness, memory loss or headache in any activity in the past 30 days.

Athlete Signature: _____	Date: _____
Guardian Signature (if under 18 yrs): _____	Date: _____

Send to:            2009 KEES CANADA CUP  
                      c/o KEES Taekwondo  
                      333 4th Avenue North (lower level)  
                      Saskatoon, SK S7K 2L8

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Office Use Only

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