**INDIVIDUAL PADDLER INTENT FORM**
IVF Va’a World Elite Sprint Championships 2020
Hilo, Hawaii

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| **IMPORTANT INFORMATION** |

FORM TO BE RETURNED TO worlds@wakaama.co.nz by 5th January

**Intent fee $20**
Payable to: Waka Ama NZ Kiwibank A/C 38-9008-0422153-00

First Trial : February (Date TBA)

Venue: TBA

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| **PERSONAL INFORMATION** |

First Name: Last name:

Club:

Date of Birth:

Contact Email: Contact Cell No:

Home No: Day time No:

Postal Address:

#### Please circle the category you are submitting intent for:

|  |  |
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| **Elite Women** | **Junior (19) Elite Development Women** |

 *Paddlers may choose to trial for 2 categories*

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| **WAKA AMA BACKGROUND** |

Previous paddling experience in 500 words or less:

*For example:*

* *Previous Waka Ama Nationals or Long Distance Nationals*
* *Overseas Distance Race experience*

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| --- | --- | --- | --- | --- | --- |
| 1. | Seat \_\_\_\_ | 2. | Seat \_\_\_\_ | 3.  | Seat \_\_\_\_ |

**Preferred Seat in a W6 Canoe (1 = most preferred)**

Previous international and national representation in any sport:

**Do you have access to a W1 or OC1 for training?** Yes / No

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| **DECLARATION** |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_confirm that the information provided in this application form and in any supporting documents or verbally provided as part of my application is accurate and correct and no material information has been omitted. I understand that any incorrect, misleading or omitted information may deem me ineligible for selection.

Signed: Date:

***If Competitor is under 18 the Waiver must be signed by Parent or guardian:***

Full Name of Parent/guardian:

Relationship to Paddler: Contact Phone :

Signed: Date:

Club Delegate name: Signature

**Notes:** Intents will not be accepted without the endorsement of an Affiliated Waka Ama NZ club. Intents will not be accepted without Intent fee of **$20**