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www.cisscanada.com

Windsor-Essex Catholic District School Board – Sport Academy

Supplementary Questions						
Stude	nt Name:			Nationality:		
Date o	of Birth: year: m	onth:	day:	Height:		
1. W	hich SPORT ACADEMY are you	applying for:				
2. Do	you play for a league or club	in your home cou	untry?	Yes	No	
If yes:	Club/League Name:					
	What level is this club/leagu	e?				
	Do you know the associated	the associated level this club/league would be in Canada?				
	How many years have you b	een playing?				
	How many hours per week o	do you train?				
	What position do you play?					

You may receive a jersey and/or Dri-Fit fitness shirt. Which size would you require:

			Hockey Academy Only
	General Shirt	Dri-Fit Fitness Shirt	Hockey Jersey
Adult Small			
Adult Medium			
Adult Large			
Adult X-Large			
Adult XX-Large			
Youth – Large			
Youth – X-Large			
Goalie – Adult X-Large			
Gaolie – Adult XX-Large			

MLI Education Group

