

APPLICATION FORM

ASSOCIATION: _____
TEAM NAME: _____
TEAM SPONSOR: _____

TEAM COLOURS

1ST SET BASIC _____ TRIM _____
 2ND SET BASIC _____ TRIM _____

TEAM DIVISION

(check one)

TYKE _____ NOVICE _____
 ATOM _____ PEEWEE _____

Bantam _____

GOVERNING BODY

(check one)

ALLIANCE _____ GTHL _____ OMHA _____ OTHER _____

NAME OF COACH	NAME OF MANAGER
ADDRESS	ADDRESS
TELEPHONE EMAIL	TELEPHONE EMAIL
FAX	FAX
I understand that current approved H.C.Rosters for all players and team officials must be presented to participate in the tournament.	I understand that current approved H. C. Rosters for all players And team officials must be presented to participate in the tournament.
Signature _____	Signature _____

Please return completed application form and cheque for entry fee of \$725.00 (payable to **Alf Langdon Play Hockey Fund**)

to Alf Langdon Memorial Tournament
 381 Finkle St.
 Woodstock, On
 N4V 1A3

Permission of the _____ Minor Hockey Association has been granted to the Hockey Club to compete in the 2014 Alfred W. Langdon Memorial House League Tournament

SIGNATURE OF ORGANIZATION OFFICIAL: _____ TITLE: _____

NO REFUND FOR CANCELLATION OF ACCEPTED APPLICATIONS AFTER THE TEAM HAS BEEN NOTIFIED OF THEIR ACCEPTANCE.

