

St. Marys Minor Hockey Association

www.smmha.ca

2022 AE TOURNAMENT APPLICATION - February 4 - 6, 2022

TEAM NAME:	LEAGUE:
CLASSIFICATION: (Circle one)	COACH:
GROUP 2 3 4 5	
MANAGER:	EMAIL ADDRESS:
TELEPHONE #:	ALTERNATE CONTACT:
	CLASSIFICATION: (Circle one) GROUP 2 3 4 5 MANAGER:

I, the undersigned team official, hereby declare that all of our team players involved in this tournament are signed and carded in accordance with the rules of the hockey governing body in our area. I understand that our team will have to present approved player and team official roster at the time of application/registration before playing the tournament.

I will present all permission forms for tournament participation, duly completed and authorized.

SIGNATURE:	DATE:
NAME (print):	TITLE:
For Office Use Only	
Date of Receipt:	Date Notified: