

Princeton and District Minor Hockey Association

Tournament Application

Tournament Division _____

Tournament Date _____

Association _____

Team name _____

Team colors _____

Manager name _____

Manager email/cell# contact _____

Coach _____

Coach email/cell# contact _____

This application does not guarantee acceptance into the selected tournament. Accepted team cheques will be cashed as received. *Out of Province or out of Country teams please contact tournament director for extra costs.* There is a 30 day cancellation deadline prior to the start of a tournament at which time the tournament fee will not be refunded. If the spot is not subsequently filled, a \$200 penalty will be charged and the remainder of the tournament fee will be reimbursed.

O.M.A.H.A., B.C.A.H.A. and C.H.A. rules apply.

Thank you for your application. You will be notified once payment has been received and spot is confirmed.

An official copy of your BC Hockey roster must be sent to the Tournament Chair prior to arriving at the tournament.

We realize that by registering, we acknowledge the rules and conditions set by the Tournament and that P.D.M.H.A. assumes no responsibility for accident, injury or property damage or loss. Also, any damage to dressing rooms will be reported to your association for payment.

Please make cheque payable to Princeton & District Minor Hockey Association.

Please send payment to:

PRINCETON & DISTRICT MINOR HOCKEY
TOURNAMENT DIVISION
P.O BOX 325
PRINCETON, B.C
V0X 1W0

PDMHA Use Only	Date Received	Acknowledged/Date
	_____	_____
	Payment Amount Received	Cheque #/MO
	_____	_____