



Notice of Attendance at National Competition

Notice of Intent to Attend a National Competition

Provincial/Associate Member Association: _____

Name of Contact: _____ Date: _____

Signature: _____ Position: _____

Competition

Box

- Masters Senior A Senior B Junior A Junior B
 17U 15U 13U

Men's Field

- Senior Junior U17 U19

Women's Field

- Senior Junior

Identification of Club/Team

Has the participating Club/Team been Identified Yes No

If the Club/Team has been identified, please complete the following:

Name of Club/Team _____

City _____

Contact Information for Club/Team:

Name of Contact _____ Title _____

Address _____

Home Phone _____

Business Phone _____

Registration Fee - Payable to Lacrosse Canada

- Full Payment Enclosed Deposit Payment to Follow