

**Association
canadienne
de crosse**



**Canadian
Lacrosse
Association**

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
☐Midget ☐Bantam ☐Peewee

Men's Field

☐Senior ☐Junior ☐Intermediate ☐Youth

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 the Canadian Lacrosse Association

☐Full Payment Enclosed ☐Deposit ☐Payment to Follow