



## Vegreville and District Minor Hockey Association

### PeeWee Tournament Application Form

#### Tournament Information

Date: Nov 22, 23, & 24, 2019

HA Sanction # HA-19337697

Location: Vegreville Recreation Centre  
4509 48 St

Games: Each team is guaranteed 3 games

Cost: \$1100

#### TEAM INFORMATION

Name: \_\_\_\_\_

Home Association: \_\_\_\_\_

Team Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

League Your Team Plays In: \_\_\_\_\_

How is your league structured and what is your team designated as (ie. A, B, C; Tier 1-6)

What is your team's current place in your tier? \_\_\_\_\_

How many players are registered in your PeeWee division within your association this season? \_\_\_\_\_

How many Tier 3 & 5 teams were created in your division? \_\_\_\_\_ & \_\_\_\_\_

Please provide the number of first year players \_\_\_\_\_ and second year players \_\_\_\_\_ on the team

How many team members are goalies \_\_\_\_\_ Are they first or second year players \_\_\_\_\_

Please rate each of your goalies on a scale of 1-10 \_\_\_\_\_

Record of last 3 games:

Opponent	Final Score	W or L	Opponents Tier

Please email this application to troy\_weinkauf@hotmail.com by Nov 1, 2019.

**THIS APPLICATION FORM DOES NOT GUARANTEE YOUR TEAM A SPOT IN OUR TOURNAMENT.**

Applications will be reviewed and best matched teams will be contacted by Nov 7 and invited. Upon receiving our invitation, payment is required to be received by us within a week in order to hold your spot. The organizing committee reserves the right to offer a spot to another team should a team fail to send payment on time. Once we have received your cheque, you will be contacted with confirmation. Please make cheque payable to Vegreville and District Minor Hockey Association and send to Carman Ogrodnick c/o VDMHA Box 1725 Vegreville Alberta, T9C 1S8.

