

Williams Lake Minor Hockey Association

**Promissory Note**

\$ \_\_\_\_\_

For the value received, the undersigned promises to pay Williams Lake Minor Hockey Association the sum of \_\_\_\_\_ Dollars on or before this date \_\_\_\_\_ (This date must be two (2) weeks prior to the Tournament date)

Signed at Williams Lake on \_\_\_\_\_

\_\_\_\_\_

Treasurer

\_\_\_\_\_

Promisor

Team Request funds: \_\_\_\_\_

For the Purpose of : \_\_\_\_\_  
(Tournament Attending ie 100 Mile Pee Wee Rep)

Date of Tournament: \_\_\_\_\_

Name of Head Coach: \_\_\_\_\_

Name of Assistance Coach: \_\_\_\_\_

Name of Team Parent/Manager: \_\_\_\_\_

Email address of Promisor: \_\_\_\_\_

Please attach a copy of the Tournament Registration Form

**Promissory Note must be paid in full prior to Tournament Date**