

TOURNAMENT/JAMBOREE APPLICATION

RBC Centre 259 Commodore Dr. Dartmouth, NS B3B 0M1 902.454-9400 www.hockeynovascotia.ca

Title

TOURNAMENT		NS teams only
		Inter-Branch
		International
HOST ASSOCIATION		
LOCATION		
APPROVALS (Signatures)		
	REGIONAL DIRECTOR	ASSOCIATION PRESIDENT
TOURNAMENT CONTACT PERSON:	(F	lome)
		Office)
-	(F	-ax)
-		
	Town	Postal Code
-	Email Address (Required)	
INDICATE DIVISION(S) APPLICABLE	U9 U11 U13 U15 U18	
	FEMALE U11 FEMALE U13 FEMAL	E U15
	FEMALE U18	
SPECIFY CLASSIFICATION(S)	AAA AA B C	
TOURNAMENT DATES REQUESTED		
U9 Division) and shall report all penalties	s to abide by all Hockey Canada, HNS Rules s and suspensions daily to the appropriate p o HNS within 30 days of completion of event r the Host Association.	persons. This tournament also

IMPORTANT:

Signature

The form must contain signatures of the appropriate Regional Director and host Hockey Association president.
For Inter-Branch (tournaments involving teams from other Hockey Canada Branches) and International tournaments, proper deadlines must be met per HNS By-Laws and fees paid in full per Hockey Canada Regulations.
II⁹ Please observe applicable Rules and Regulations specific to U9 Jamborees and Tournaments.

5.	09. Flease observe applicable rules and regulations specific to 09 Jamborees and rounaments
4.	To have this event posted on the Hockey Nova Scotia website, fill out the form here.
Region	al Director/Office use:

DATE RECEIVED	DATE APPROVED	APPROVED BY