Hockey Newfoundland & Labrador

P.O. Box 176, Grand Falls-Windsor, NL A2A 2J4
Ph: 709-489-5512 Fax: 709-489-2273
Email: office@hockeynl.nf.net

TOURNAMENT SANCTION REQUEST FORM

Tournament Official Name: _____

Tournament Location: _____

Tournament Date: _____

Indicate Division(s) Applicable _____Novice _____Initiation _____Atom _____Pee Wee
_____Bantam _____Midget _____Other_____

Indicate Category Applicable _____AAA _____All Star _____House League

Will you be having teams entered from outside our branch: _____Yes _____No

If yes, please submit a tournament fee of $50, and a $10 fee for each team from outside the branch as per HC Regulation Q18(b).

Please send a copy of all travel permits to the branch office for teams traveling from outside our branch.

Requests must be forwarded to the branch office at least three weeks prior to the commencement of the tournament for possible sanctioning.

This Tournament hereby agrees to abide by all HC and HNL Rules and Regulations

Contact Name:_____ Phone( )_____Fax:
( )_____

Signature:_____ Association/League/Team_____

Host Association President's Signature:_____

FOR OFFICE USE ONLY

HNL Date Received:_____

HNL Council Authorization:_____ Date Approved:_____

HNL Authorization:_____ Date Approved:_____