

Select one

## LUMBY MINOR HOCKEY ASSOCIATION

### 2017 – 2018 Tournament Application

| DIVISION                | <input checked="" type="checkbox"/> | FEE *  |
|-------------------------|-------------------------------------|--------|
| Midget                  |                                     | \$1000 |
| Female<br>Midget/Bantam |                                     | \$1000 |
| Bantam                  |                                     | \$975  |
| Pee Wee                 |                                     | \$950  |
| Atom                    |                                     | \$850  |
| Novice                  |                                     | \$750  |
| Initiation              |                                     | \$550  |
|                         |                                     |        |
|                         |                                     |        |
|                         |                                     |        |

CHEQUE # \_\_\_\_\_

On behalf of :

Association and Team Name

I would like to submit an application for acceptance into the tournament  selected.

**I understand;**

This application **does not constitute automatic acceptance** into the tournament and that if not accepted a full refund would be forwarded immediately. If for any reason, the team is unable to attend after acceptance, I will notify the **tournament director** immediately.

**Teams canceling within two weeks of tournament date may be subject to a forfeit of their entry fee or a penalty, depending on whether another team can be found as a replacement.**

*In consideration of being accepted to participate in the Lumby Minor Hockey Tournament, related events and activities, the undersigned acknowledges and agrees on behalf of the attending team that Lumby Minor Hockey will not be held responsible for any accident, injury or loss however caused and hereby releases and holds harmless Lumby Minor Hockey Association, their Officers, Directors, Coaches, Agents and/or employees, other participants, arena officials and owners, sponsors and advertisers with respect to any and all injury, disability, or loss to person or property, whether caused by the negligence of the releases or otherwise.*

This name and address will be used as the exclusive contact between the team and Lumby Minor Hockey – Tournaments

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

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Signature \_\_\_\_\_ Address \_\_\_\_\_

Name of Signatory \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_

Title \_\_\_\_\_

E Mail \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Address \_\_\_\_\_

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Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Please complete above information and attach a copy of your team roster printed from the HCR system in anticipation of acceptance and forward cheque to:**

Lumby Minor Hockey Association  
Tournament Director  
Box 52  
LUMBY, BC.  
V0E 2G0

**E Mail Questions to**  
lumbyminorhockeytournaments@gmail.com

**Further Information available at**  
[www.lumbyminorhockey.com](http://www.lumbyminorhockey.com)