

**38th Annual Woolwich Wildcat Weekend Tournament
November 8, 9, 10, 2013**



Team Application Form

City/Municipality: _____

Minor Hockey Organization: _____

Full Team Name: _____

Minor Hockey Association: OMHA _____ ALLIANCE _____ OTHER : _____

League Association: (i.e. Tri-county, Hub league): _____

OMHA Classification: _____ (i.e. A, BB, in case of AE please indicate AE1, AE2 AE3, AE4, etc)

LEVEL & player birth years: _____ (please specify if your team is minor or major)

TEAM COLORS: HOME (BODY/TRIM) _____

AWAY (BODY/TRIM) _____

Contact Information – Please PRINT Clearly (or type this information before printing)

HEAD COACH: _____ PHONE: () _____

ADDRESS: _____

CELL: () _____ EMAIL: _____

MANAGER: _____ PHONE: _____

ADDRESS: _____

CELL: () _____ EMAIL: _____

By signing this form, the team manager, on behalf of his team, releases the sponsors of the above named tournament, its officials, arena management and all involved in the tournament from any liability for any injury or accident which may be incurred by any player or team official while participating in and/or traveling to or from the said tournament and accepts all decisions of the tournament as final.

Make Cheque Payable to: WOOLWICH WILDCAT WEEKEND TOURNAMENT

****Cost of tournament is \$1000.00 per team or \$900 if payment received in full by September 12th, 2013.– POSTDATED CHEQUES WILL NOT BE ACCEPTED****

PLEASE MAIL REGISTRATION TO: Tracey Williams, 19 High Street, Elmira, ON N3B 3C7
INQUIRIES : E-mail: williams0528@foxmail.ca Phone: 519-669-1737

Application Deadline: SEPTEMBER 30, 2013

Coach or Manager's SIGNATURE: _____