Received at OLA Date:

# 2017 TOURNAMENT HOSTING APPLICATION



List of Approved Tournaments will be released at 2016 AGM

The undersigned Association requests OLA sanctioning to host the following Tournament:

Application & non-refundable payment must be received by the OLA Office no later than

## Friday September 30, 2016

Any applications and payments received after this date will not be considered – No exceptions!

Tournament hosting fees must accompany application (MR1.06) which are Non Refundable

Tournament Convenor &/OR Co-Convenor MUST attend Tournament Module at the SAGM to be sanctioned

All Rules and Regulations apply to the tournament as per the OLA Constitution and By-Laws

All approved tournaments agree to use OLA approved tournament schedule format unless prior consent has been given by tournament committee

### Incomplete applications will not be processed

# **TOURNAMENT DATES, DIVISIONS AND VENUES**

# Tournament Name Lacrosse Club Name Requested Date(s) Alternate Date(s) Tournament Days Maximum Number of Teams per Division

### **DIVISIONS**

DIVISION	CATEGORY (please check mark what applies and number of teams per category)								HOSTING FEE
Paperweight	Open – USING 2 MIN. BUZZER? Yes No								
Tyke	A #	A/B#	B#	B/C #	C#	C/D #	D#	D/E#	
Novice	A #	A/B#	B#	B/C #	C#	C/D #	D#	D/E#	
Pee Wee	A #	A/B#	B#	B/C #	C#	C/D #	D#	D/E#	
Bantam	A #	A/B#	B#	B/C #	C#	C/D #	D#	D/E#	
Midget	A #	A/B#	B#	B/C #	C#	C/D #	D#	D/E#	
Intermediate	Open #								
(only 1 application per zone)									
Girls Box	Novice # Peewee # Bantam # Midget # Int #								
(must accept all teams that apply)									
Field	DIVISION								

**Hosting Fees**: \$50.00 per age division/one category; \$50.00 per each additional category. i.e Peewee A/B and C will be \$100.00. A/B is considered one division and C is considered one division. The only divisions that are exempt from this are paperweight and intermediate which are open

Received at OLA Date:							
		VENUE(S) – inclu	de all arenas being used				
Arena 1 Name & Address			<b>.</b>				
Arena 2 Name & Address							
Arena 3 Name & Address							
Arena 4 Name & Address							
Arena 5 Name & Address							
	1	OURNAMENT CO	NTACT INFORMATION				
TOURNAMENT CON							
TOURNAMENT CON			R (must attend Tournament Mo it to appear in OLA Dire	dule at the SAGM to be eligible) ctory			
Name		•					
Complete Address							
Email							
Best Contact Number							
	REF	EREE-IN-CHIEF	(must be carded in current yea	ır)			
Name							
Complete Address							
Email Death Court and News Inc.							
Best Contact Number	ATC /-						
Name	AIE (Ensui	re the OLA designat	e is aware you have assigned t	nem to your tournament)			
Complete Address							
Email							
Best Contact Number							
	DISCI	PLINE COMMITT	EE (3 MEMBERS but not your	RIC)			
Name			Na	ime			
Complete Address			Complete Address				
Email			Email				
Best Contact Number			Best Contact Number				
Name							
Complete Address							
Email							
Best Contact Number							
Do you wish to have the	RDT (Refere			ere is a fee for the RDT to attend?			
If you have	auestions re		<mark>:S OR NO</mark> n, please contact lan Garrison @	igarrison@me.com			
<b>,</b>	4	. 9	., р	<u> </u>			
Signature of Associat	ion Prosic	lont	Signature of Tou	urnament Convenor			
Oignature of Associati		ient	orginature or rot	arriament convenci			
			-				
Date			Date				
DEMINISED, ENGLISE	VOUD NO	I DECLINDADI E SA	MENT IS ENOUGOED AND DE	OFIVER BY THE OLA OFFICE			
REMINDER: ENSURE YOUR NON REFUNDABLE PAYMENT IS ENCLOSED AND RECEIVED BY THE OLA OFFICE  NO LATER THAN FRIDAY SEPTEMBER 30, 2016							