



Tournament Entrance Fee Request Form

Division: _____

Team Name: _____

House or Rep: _____

Division Head: _____

Email: _____

Phone Number: _____

Tournament Location: _____

Tournament Date: _____

Entrance Fee Amount: \$ _____

Cheque Payable to: _____

Call or email division head for pick-up: _____

Notes: _____

Please email entrance fee request form to:

2ndvice@terraceminorhockey.ca