



NANAIMO MINOR HOCKEY TOURNAMENT 2023-24

Tournament you are requesting to attend

Name

First Name Last Name

Email

example@example.com

Phone Number

Please enter a valid phone number.

HOME ASSOCIATION - IN FULL

TEAM NAME & COLORS

NUMBER OF PLAYERS ON TEAM

DIVISION CURRENTLY PLAYING IN

DIVISION LEVEL

HEAD COACH NAME

HEAD COACH EMAIL

HEAD COACH CELL

Have you attended a Nanaimo MHA tournament in the past, what year?

ADDITIONAL INFORMATION

Please send application to the email listed on our website for the requested tournament,
www.hockeynanaimo.com/tournaments/

FULL DISCLAIMER: This is an application only, payment will NOT guarantee acceptance.

You will be contacted when a decision has been made if you are accepted or not. Payment will be requested at that time IN FULL.

Please do not continue to email as this will not help you being accepted.

Roster will be requested once you are approved.