



**MINOR OAKS HOCKEY ASSOCIATION INC.**  
 1026 SPEERS ROAD, UNIT 8-9, OAKVILLE, ONT. L6L 2X4 • (905) 338-9220 • FAX: (905) 338-9677 • www.moha.on.ca



**2009 RICHARD BELL MEMORIAL  
 INTERNATIONAL MINOR HOCKEY TOURNAMENT  
 DECEMBER 27 – 30, 2009**

**APPLICATION FORM**

**TEAM NAME:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

**Division:** (circle one) Minor Atom Minor Peewee Minor Bantam Minor Midget

**Category:** (circle one) AAA AA A AE

**Team contact:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Prov/State \_\_\_\_\_ Postal/Zip code \_\_\_\_\_

Phone (H) \_\_\_\_\_ (B) \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

**Head Coach:**

Name: \_\_\_\_\_

Phone (H) \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**PLEASE NOTE:** This application must be accompanied by a cheque made payable to “Richard Bell Memorial International Minor Hockey Tournament” in the full amount of \$990 CDN. Your cashed cheque is confirmation of acceptance into the tournament. There will be a \$50 charge for NSF cheques.

**WE WILL ALSO NEED:**

- A team roster with player names, jersey numbers, coaching staff and manager for our program as soon as possible
- A Travel Permit or Permission to Play letter signed by your organization
- A copy of your official approved roster (OMHA, GTHL, NOHA, ALLIANCE, ODMHA, USA HOCKEY) and, if applicable, your official approved AP roster

**APPLICATION DEADLINE: OCTOBER 15, 2009**