### **2018 ORILLIA BOYD BALKWILL MEMORIAL TOURNAMENT**

JUNE 22, 23 and 24

COST: \$650 per entry

**TO REGISTER:** 

Please email registration form (roster can be emailed at a later date) to confirm attendance.

Acceptance into the tournament will be confirmed once payment is received.

**Contact:** Scott Balkwill

omlatournament@orilliaminorlacrosse.com

#### Mail Payment and Registration Form to:

Orillia Minor Lacrosse Box 415, Orillia, ON, L3V 6J8

PAYMENT MUST BE RECEIVED IN ORDER TO CONFIRM YOUR ACCEPTANCE IN THE TOURNAMENT

Cheques should be payable to Orillia Minor Lacrosse Association.

**Please include your registration form** with your payment so that we can ensure it is applied to the appropriate team.

#### **CANCELLATION POLICY:**

No refunds after May 12<sup>th</sup> 2018

## ORILLIA BOYD BALKWILL MEMORIAL TOURNAMENT REGISTRATION

TEAM:			#:			PRIMARY JERSEY COLOUR HOME:			
ASSOCIATION:				AWAY		AWAY :			
ZONE:									
LEVEL:	В	С							
DIVISION:	PAPER WEIGHT			NOVICE	P	EEWEE	BANTAM	MIDGET	
CONTACT INFORMATION:									
PRIMARY CONTACT:									
NAME:				EMAIL:					
POSITION:				PHONE NUMBER Home: Cell: Work:					
CECOND A DV	CONTACT								
SECONDARY CONTACT: NAME:				EMAIL:					
POSITION:				PHONE NUMBER Home: Cell: Work:					

PLEASE NOTE: A copy of this registration form MUST accompany payment to ensure the entry fee is applied to the correct team. Rosters can be emailed at a later date but must be submitted by June 1<sup>st</sup> 2015.

# ORILLIA BOYD BALKWILL MEMORIAL TOURNAMENT ROSTER

TEAM NAME:			TEAM #:	DIVISION:			
				LEVEL: B			
				C			
PLAYER RO	STER:			,			
NUMBER		NAME					
BENCH STA	AFF:						
POSITION				NAME			
	Coach						
Asst. Coach							
Asst. Coach							
Trainer							