



SPRING ELITE CLASSIC

APPLICATION FORM - Book Early! Call (519) 963-2261

One application per Tournament. If entering more than one team, please make copies.

Select Tournament:

PRO-TIPS / SOURCE FOR SPORTS SPRING HOCKEY CLASSIC.

May 15-17 / 2009, London Ontario.

Team Name: Team Colours:

Year Born: Category: AAA

Head Coach / Manager Names:

Address:

City: Province / State:

Postal Code / Zip Code:

Home Phone: Bus. Phone:

Fax:

Email:



SPRING ELITE CLASSIC

Please make Cheques Payable to Pro-Tips Sports Corp.

COST: \$995.00 CDN.

Print & Mail Completed Registration & Payment To: Pro-Tips Sports Corp. 148 Fullarton Street London
Ontario, N6A 5P3

Print, & Fax or Mail Payment with Completed Application TODAY fax: (519) 432-1182

TEAM LIABILITY INSURANCE

Team liability insurance is a **MANDATORY** for the Pro-Tips / Source for Sports Spring Classic

INSURANCE DETAILS MUST BE COMPLETED NO LATER THAN ONE WEEK PRIOR TO THE TOURNAMENT

Teams must provide Pro-Tips Sports:

- **The Insurance Company your team or team members are insured under, the policy number(s) and the policy expiry date.**

Tournament Fees are NOT refundable after acceptance in tournament.

By signing this application the Team Manager or Head Coach, on behalf of his or her team, releases the Tournament, its officials, arena management and all concerned with the event, from any liability for any injury or accident which may be incurred by any player or team official while participating or while traveling to or from this tournament.

X _____
Team Official Signature Date

Print Name _____