

**ST. GEORGE – JACK TOLHURST MEMORIAL REP TOURNAMENT 2021/2022**

**JANUARY 14 TO 16, 2022**

***TOURNAMENT ENTRY FORM***

Centre:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OMHA Classification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OMHA Centre Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team Entered:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age Level:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Head Coach Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainer Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please include one contact e-mail address and name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please verify that all team participants and staff are OMHA Vaccine policy compliant (circle one): YES / NO

TEAM ENTRY GUIDELINES:

* Teams will be deemed registered once registration fee or deposit (minimum $100) is provided to SGMHA
* Fees may be in cheque form (not post dated please) or e-transferred to: [sgmhpayments@yahoo.com](mailto:sgmhpayments@yahoo.com)
* Completed entry forms, approved rosters and travel permits to be e-mailed to: [jjstone923@outlook.com](mailto:jjstone923@outlook.com)
* Tournament schedule and rules to be shared (website) and provided (e-mail) at least one week ahead of tournament start date.

ALL MAILINGS TO BE SENT TO:

Jack Tolhurst Memorial Rep Tournament

PO Box 441

St. George Brant, Ontario

N0E 1N0

**Please provide your players’ names, birth dates, player positions and AP status (if any) in the below chart:**

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| **Player name & Birth date** | **Jersey #** | **Skater or Goalie?** |
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