

QUEEN CITY CLASSIC TOURNAMENT APPLICATION FORM

Division – please check one

U9 (Bunny)

U10 (Novice)

U12 (Petite)

U14 (Tween)

U16 (Junior)

Team Name		Coach	
Coach		Coach	
Manager		Trainer	
Jersey Colour		Alternate Colour	

Contact Name		Email	
Phone		Cell Phone	
Address			
City		Postal Code	

TEAM ROSTER

	#	Alt #	Player First Name	Player Last Name	Birth Date (dd/MMM/yy)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					

- *Make cheque payable to Queen City Classic Tournament*