



Spirit of Duluth Hockey Tournament 2011 Application

BEFORE APPLYING PLEASE NOTE:

1. If you are planning on entering, you must be prepared for the possibility of playing as early as 9:00 am on Friday and Saturday, December 9th and 10th, 2011. There will be no changes once the schedules are sent out. The schedule and other information will be sent out around November 9, 2011
2. Please complete the attached application for EACH team you enter. If necessary, make additional copies of the required forms.
3. If you enter by email, please see appropriate email address below. When the time comes, we will be providing you with a fax number in order for rosters to be sent.
4. For questions, comments, or registration, please contact the representative from the appropriate level.

Pee Wees

Dave McLean
3500 E 1st Street
Duluth, MN 55804
Phone: 218-393-4852
Email: dmclean928@mail.com

Bantams

William Oswald
5825 Arnold Road
Duluth, MN 55803
Phone: 218-721-3073 / 218-340-1578
Email: woswald@firstam.com

Junior Gold

Ginny and Butch Orrey
137 W Ideal Street
Duluth, MN 55811
Phone: 218-727-0580
Email: oginny@charter.net

Thank you again for your interest in the Spirit of Duluth Tournament.

Please refer to the tournament web site at www.spiritofduluth.org

SPIRIT OF DULUTH HOCKEY TOURNAMENT APPLICATION

_____ Pee Wee A _____ Bantam A _____ Junior Gold

Team Name: _____

Contact Name: _____

Address: _____

Phone: _____ (Work) _____ (Home)

Fax: _____

Email: _____

Coach Name: _____

Address: _____

Phone: _____ (Work) _____ (Home)

Fax: _____

Email: _____

Asst. Coach Name: _____

Address: _____

Phone: _____ (Work) _____ (Home)

Fax: _____

Email: _____

Manager Name: _____

Address: _____

Phone: _____ (Work) _____ (Home)

Fax: _____

Email: _____

**PLEASE MAKE A COPY OF THIS FORM FOR EACH TEAM THAT YOU ENTER
Return this form to the appropriate representative for your team's level.**

SPIRIT OF DULUTH HOCKEY TOURNAMENT PERMISSION FORM

The _____ hockey team has permission to play a hockey game before 7:00 PM on a school night.

Name: _____

Title: _____

Date: _____

**THIS FORM MUST BE SIGNED AND RETURNED BEFORE WE CAN ACCEPT
YOUR TEAM IN THE TOURNAMENT!!!**