Essa Minor Hockey Association
Tournament/Festival Cancellation Notification

NOTE: Only 1 (one) Application per Tournament/Festival

Team:_____ Submitted by:_____

Manager:_____ phone:_____email:_____

Coach:_____ phone:_____email:_____

Tournament/Festival Information

OMHA sanctioned Tournament: ☐ Festival: ☐ Cost: $_____

Date(s):_____

Location: _____

Approval Received: _____ Cheque #_____ Date Issued: _____
date

Host Centre returned EMHA Cheque: ☐ Issue Host Cheque: ☐
Other:_____
_____

Submitted to: Treasurer: _____

Submitted to OMHA/LL Contact: _____ Submitted to Ice Convenor:_____

Date Received:_____ Copy: ☐ Electronic: ☐

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In the event of the cancellation of the Tournament/Festival a Cancellation Form **must be** received prior to rescheduling of Practice/Game Ice or approval of application for an alternate Tournament/Festival

EMHA USE ONLY

Received: _____ Confirmed receipt: ____
Previous Tournament(s):
Date: _____Location:_____
Date: _____Location:_____
Date: _____Location:_____
Date: _____Location:_____

Money Collected: _____ Cheque #:_____Date Issued: _____

For Electronic Submission: E-mail completed form
To: omha_centre_contact@essaminorhockey.com **OR** llcontact@essaminorhockey.com; ice@essaminorhockey.com; and emhatreasurer@essaminorhockey.com
Subject: EMHA Tournament Cancellation