

Pacific Coast Amateur Hockey Association Tournament Application Form

Form127 (Rev: Sep/18) (Rev: Jan/21) (Rev. Jul/22)

Please complete a separate form for each BC Hockey Tournament Sanction Permit

Host MHA:				BCH Tournament Sanction #:							
Tournament Dates -		From:				То:					
Executive Member Making Request											
Name: Position:											
Address:							Telephone	:			
City:							Postal Code	-			
Email:											
Tournament Director											
Name:	me:										
Address:							Telephone				
City:							Postal Code	:			
Email:											
Tournament Contact Person											
Name:											
Address:							Telephone	1			
City:							Postal Code	:			
Email:											
PCAHA Preliminary Approval and Game Numbers to be forwarded to (check one): Executive Member Tournament Director Tournament Contact											
	Tournament J					Ja	mboree				
✓ Divis	ion	# Game	s	1	Division	#	Games		/	TYPE	
U6					U15 A					Branch	
U7					U15 C					Inter-Branch	
U8 U9					U18 A U18 C					International	
U11 A	\				U21 A				7	FORMAT	
U11 C					U21 C					Knockout Style	
U13 A	\			<u> </u>						Round-Robin	
U13 C	;				FEMALE						
(Please indicate appropriate Division(s), Total # Games per Division, Tournament Type & Format)											
 Instructions: ● Enclose a copy of YOUR BC Hockey Tournament Sanction, AND ● Enclose a copy of YOUR Tournament Rules and Regulations. Mail or e-mail this form and the above items to: PCAHA Tournament Officer Phone: 604-205-9011; E-mail: tournaments@pcaha.ca Address: #114-3993 Henning Drive, Burnaby, BC V5C 6P7 											
Signature:				Date:							