



## 2019 TOURNAMENT HOSTING APPLICATION

A list of approved tournaments will be available January 18, 2019

The undersigned Association requests OLA sanctioning to host the following Tournament:

***Application & non-refundable payment must be received by the OLA Office no later than***

***Thursday, November 15, 2018***

***Any applications and payments received after this date will not be considered – No exceptions!***

*Tournament hosting fees must accompany application (MR1.06) which are Non-Refundable (credits are provided to unsuccessful host applicants)*

Tournament Convenor &/OR Co-Convenor MUST attend Tournament Module at the SAGM to be sanctioned

*All Rules and Regulations apply to the tournament as per the OLA Constitution and By-Laws*

All approved tournaments agree to use OLA approved tournament schedule formats unless prior consent has been given by tournament committee

**Incomplete applications will not be processed**

### TOURNAMENT DATES, DIVISIONS AND VENUES

#### DATE(S)

Tournament Name	
Lacrosse Club Name	
Requested Date(s)	
Alternate Date(s)	
Tournament Days	
Maximum Number of Teams per Division	
Indicate Games Guaranteed	2 Game Guarantee ___ 3 Game Guarantee ___ 4 Game Guarantee ___

#### DIVISIONS

DIVISION	CATEGORY	HOSTING FEE
	Please indicate by number 1 <sup>st</sup> choice and 2 <sup>nd</sup> choice for rating of tournament	
Paperweight	Open – *MUST USE OLA Paperweight Rules*	
Tyke	A/B# ___ B/C # ___ C/D # ___ D/E # ___	
Novice	A/B# ___ B/C # ___ C/D # ___ D/E # ___	
Pee Wee	A/B# ___ B/C # ___ C/D # ___ D/E # ___	
Bantam	A/B# ___ B/C # ___ C/D # ___ D/E # ___	
Midget	A/B# ___ B/C # ___ C/D # ___ D/E # ___	
Intermediate	Open #	
Girls Box	Novice # ___ Peewee # ___ Bantam # ___ Midget # ___ Int # ___	
Field	DIVISION	

**Hosting Fees:** \$50.00 per age division; \$50.00 per each additional category.

Paperweight and Intermediate are open and are only 1 division.

***If you are applying for an A/B tournament you must have at least 3 teams from your center rated (qualified) to participate in your tournament at the A level from Tyke to Midget.***

**VENUE(S) – include all arenas being used**

Received at OLA Date: \_\_\_\_\_

Arena 1 Name & Address	
Arena 2 Name & Address	
Arena 3 Name & Address	
Arena 4 Name & Address	
Arena 5 Name & Address	

**TOURNAMENT CONTACT INFORMATION**

**TOURNAMENT CONVENOR &/OR CO-CONVENOR (must attend Tournament Module at the SAGM to be eligible)**

**Information as you wish it to appear in OLA Directory**

Name	
Complete Address	
Email	
Best Contact Number	

**REFEREE-IN-CHIEF (must be carded in current year)**

Name	
Complete Address	
Email	
Best Contact Number	

**OLA DESIGNATE (Ensure the OLA designate is aware you have assigned them to your tournament)**

Name	
Complete Address	
Email	
Best Contact Number	

**DISCIPLINE COMMITTEE (3 MEMBERS but not your RIC)**

Name		Name	
Complete Address		Complete Address	
Email		Email	
Best Contact Number		Best Contact Number	
Name			
Complete Address			
Email			
Best Contact Number			

Do you wish to have the RDT (Referee Development Team) attend your tournament? there is a fee for the RDT to attend.

YES \_\_\_\_ NO \_\_\_\_

If you have questions regarding RDT program, please contact Frank Lawrence @ vpofficiating@ontariolacrosse.com

\_\_\_\_\_  
**Signature of Association President**

\_\_\_\_\_  
**Signature of Tournament Convenor**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

REMINDER: ENSURE YOUR NON-REFUNDABLE PAYMENT IS ENCLOSED AND RECEIVED BY THE OLA OFFICE:

**NO LATER THAN THURSDAY, NOVEMBER 15, 2018**