

krichard@schoolsportsnl.ca P: 729-0567 Fax: 729-2705 www.schoolsportsnl.ca

PROVINCIAL TOURNAMENT REMITTANCE FORM

*To be completed and forwarded to the SSNL office no later than 2 weekes after the tournament

TOURNAMENT INFORMATION				
SPORT				
HOST SCHOOL(S)				
CONVENORS				
REFEREES				
REFEREES				

CLASSIFICATION/ GENDER					
	M/ F/ CO-ED				
4A					
3A					
2A					
Α					

PARTICIPATING TEAMS

SCHOOL	Teacher Coach	Non-Teacher Coach	Teacher Sponsor	Placing	# Athletes
TOTAL # OF ATHLETES					

TEAM SPORTSMANSHIP WINNER

SCHOOLS WILL BE INDIVIDUALLY INVOICED \$7.00 PER PLAYER FOR SSNL PARTICIPATION FEES