



Travel Permit Request

Please use this form for all tournament requests.

TEAM CONTACT NAME: _____

TEAM CONTACT EMAIL: _____

TEAM CONTACT PHONE: _____

TEAM NAME: _____

DIVISION (e.g. U13): _____

CATEGORY (e.g. AA, H/L): _____

TOURNAMENT NAME: _____

TOURNAMENT SANCTION #: _____

TOURNAMENT LOCATION: _____

START DATE (dd-mm-yyyy): _____

END DATE (dd-mm-yyyy): _____

Email completed form to permits@saultmajorhockey.ca