



# IIHF Tour Application

## Incoming & Outgoing OWHA Tours



### TOUR INFORMATION

<b>Type of Tour</b> Indicate the type of tour that you are requesting official Hockey Canada sanctioning.	<input type="checkbox"/> Incoming Tour <input type="checkbox"/> Outgoing Tour
<b>Governing Body</b>	Ontario Women's Hockey Association
<b>Association Name</b>	
<b>Team Information</b>	Team Name: Division: (e.g. Bantam, Midget) Category: (e.g. AA, A, Masters, HL)
<b>Contact Information</b>	Name: Position: Address: Tel: Fax: Email:
<b>The Incoming/Outgoing team will be participating in</b>	<input type="checkbox"/> Tournament <input type="checkbox"/> Exhibition Game(s) <input type="checkbox"/> Combination of Tournament and Exhibition Game(s)
<b>Name of Tournament</b>	
<b>Dates of Event</b>	Departure Date: Return Date:
<b>Location of Event</b>	
<b>Names of participating IIHF Team(s) and affiliated Country</b>	Team(s): Country:
Total number of teams:	
<b>Overseas Team Representative Contact Information</b>	Name: Tel: Email:
<b>Traveling Branch Personnel Contact Information: Completed by OWHA</b> Must be named 30 days prior to departure date of event	Name: Address: Tel: Email:

### SUPPORTING DOCUMENTS

The following documents **must** be included with this application form and submitted to the OWHA Office.

<input type="checkbox"/> <b>Letter of Invitation</b> The letter must be from the Member Partner Association (for Incoming tour) or from each IIHF team (for Outgoing tour).
<input type="checkbox"/> <b>Acceptance of Invitation Letter</b> Official acceptance of the invitation from the participating teams.
<input type="checkbox"/> <b>Tour Itinerary</b> Outlines the date(s), time(s), location(s) for all hockey related activities and the name of participating teams.
<input type="checkbox"/> <b>Medical Insurance</b> Applies for an Incoming Tour only. This document is official proof that the incoming team has medical insurance.

OWHA APPROVAL		APPROVAL	
Signature	Date	Signature	Date