

IIHF Tour Application Incoming & Outgoing OHF Tours



TOUR INFORMATION		
		☐ Incoming Tour
requesting official Hockey Canada	sanctionning.	☐ Outgoing Tour
Team Name: mation Division: (i.e. Bantam, Minor Bantam)		
Name:		
Position:		
Address:		
Tel:	Fax:	Email:
☐ Tournament☐ Exhibition Game(s)☐ Combination of Tournament	and Exhibition Game(s)	
Departure Date:		
Return Date:		
Team(s):		
- Country:		
Name: Tel: Email:		
Address:		
Tel: Email:		
SUPPORTING DOCUMENTS The following documents must be included with this application form and submitted to the OHF Office.		
Letter of Invitation The letter must be from the Member Partner Association (for Incoming tour) or from each IIHF team (for Outgoing tour).		
Acceptance of Invitation Letter Official acceptance of the invitation from the participating teams.		
Tour Itinerary Outlines the date(s), time(s), location(s) for all hockey related activities and the name of participating teams.		
Medical Insurance		
Applies for an Incoming Tour only. This document is official proof that the incoming team has medical insurance.		
ER APPROVAL		OHF APPROVAL
Date	Signature	Date
	Team Name: Division: (i.e. Bantam, Minor Ban Category: (i.e. AAA, AA, A, MD, Name: Position: Address: Tel: Tournament Exhibition Game(s) Combination of Tournament Departure Date: Return Date: Team(s): Country: Name: Tel: Name: Address: Tel: Scluded with this application form and the participating teams. cation(s) for all hockey related active only. This document is official proof the proof of	Division: (i.e. Bantam, Minor Bantam) Category: (i.e. AAA, AA, A, MD, HL) Name: Position: Address: Tel: Fax: Tournament Exhibition Game(s) Combination of Tournament and Exhibition Game(s) Departure Date: Return Date: Team(s): Country: Name: Tel: Email Secure Address: Tel: Email Secure Address:

OHF MEMBER PARTNERS













