Lobster Pot Tournament Application Form

Name of Program _____ **Coach Name**_____

Contact Person Name_____ **Contact Person Tel.** _____

Email Address _____

Describe your team accurately. This goes a long way towards making the games as even and fun as possible:

Mites Level:
- □ **A**
- □ **B (at least one team ahead of us in program)**
- □ **C (at least two teams ahead of us in program)**
- □ **Mite "open" team, all level players, playing in a travel league**
- □ **House mite team playing in a house league**
- □ **Instructional mite team not playing in an organized league**
- □ **Other**

Describe anything else that may help us pair your team with proper opponents:

_____

_____

Mail completed application to : Steve Devlin, 820 Main St., Cotuit, MA 02635

Enclose: USA Hockey Roster
$800 Entrance Fee
Checks Payable To: The Lobster Pot

We look forward to seeing your team at Cape Cod's biggest annual hockey tournament!
SPACE IS LIMITED. Full payment and confirmation email from Director determines participating teams.

Steve Devlin, Tournament Director
Barnstable Youth Hockey VP

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