

## Provincial Championship Host Application Form

Applicant Information					
<b>Association</b>					
<b>Organizing Committee Chair</b>		<b>First Name</b>		<b>Last Name</b>	
<b>Mailing Address</b>					
<b>City</b>		<b>Province</b>		<b>Postal Code</b>	
<b>Contact Number</b>		<b>Email</b>			
Host Committee Members and Roles (if applicable)					
Event Information					
Our association would like to host the following divisions					
Zone Divisions		Club Divisions		Adult Divisions	
	All Zone		All Club		All Adult
	U14 Zone (Female)		U14 Club		18+A
	U14 Zone (Male)		U16 Club		18+B
	U16 Zone (Female)		U19 Club		
	U16 Zone (Male)	U12 Year End Event			
	U19 Zone		with capacity for	_____	teams
Our desired date is					
Competition Venues					
Primary Venue (Headquarters)					
<b># sheets</b>		<b>Address</b>			
Secondary Venue					
<b># sheets</b>		<b>Address</b>			
Tertiary Venue					
<b># sheets</b>		<b>Address</b>			

**Please Provide more information on your event below.**

**INTRODUCTION** - tell us a little bit about yourself, your committee and your event, including past hosting experience

**FACILITIES** - please provide some details on your facility, what does it have that makes it ideal for hosting an event?

**COMMUNITY ENGAGEMENT** - please provide some details on you will engage the community at your event

**EVENT DETAILS** - please provide some details on what will set your event apart from others, what types of additional events and activities will you have

**SPONSORSHIP & FUNDING** - do you have any sponsors or other funding streams confirmed? Are there any that you are planning to apply for or utilize?

**Accommodations** - Do you have host accommodations confirmed? If yes, please include name, rates, address, distance from primary venue. If no, please list potential accommodations.

	Yes		No

**ADDITIONAL INFORMATION** - is there anything else you would like us to know about your event, application or committee?

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**Our application package is complete, and includes**

**Required Documents**

<input type="checkbox"/>	Tentative Budget	<input type="checkbox"/>	Ice / Facility Contract	<input type="checkbox"/>	This application
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**Supplemental (Optional) Documents - please list other documents in blank spaces**

<input type="checkbox"/>	Accommodation Contracts	<input type="checkbox"/>	Additional Event Outlines	<input type="checkbox"/>	Community Endorsements
<input type="checkbox"/>	Hosting Proposal	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

<input type="checkbox"/>	I confirm that the information in this application is complete, true, and accurate.
<input type="checkbox"/>	I confirm that my association and Host Committee has read, and understands, the Ringette BC Provincial Championships Hosting Guidelines.

**Organizing Committee Chair**

Print Full Name Here	Signature	Date
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**Office Use Only**

Date Received	Application Complete	Signature
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Notes (missing items, follow up required)
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