

Application for Season Permit & Tournaments

The Town of Blind River
 Parks & Recreation Department
 11 Hudson St
 Blind River, ON P0R 1B0
 705-356-2251 (t) 705-356-7343

Organization/League:		
Mailing Address (full):		
Organization Email:		
Primary Phone #:		
Contact 1:		Contact 2:
Address:		Address:
Phone:		Phone:
Email:		Email:
Executive Position:		Executive Position:
Authorized Signing Officer:		Authorized Signing Officer:
Field Requested:		Days of Week:
League Start Date:		# Participants:
League End Date:		# of Teams:
Tournament Info		
Date(s) of Tournament Requested:		Mid-Season Tournament Dates (List all that may apply)
Rain Date(s):		
# of Teams:		
		Print Name:
Beer Garden Y/N:		Signature:
Insurance Attached Y/N:		Date:

