EODSA Tournament Report

Tournament Name: _____
Tournament Host: _____
Date of Tournament: _____

Jurisdiction		*Classification*		*Team Type*	
International	☐	Competitive	☐	Club Teams	☐
North American	☐	Recreational	☐	All-Star Teams	☐
Inter-Provinical	☐	Open	☐		
Inter-District	☐				
District	☐				

Season		*Divisions*		*Gender*	
Indoor	☐	Mini	☐	Female	☐
Outdoor	☐	Youth	☐	Male	☐
		Senior	☐		

Age Categories _____

Number of Teams Approved: _____

Number of Teams Participated: _____

List of Required Attachments:

Participating Teams	☐	Tournament Schedule	☐
No Show Teams	☐	Tournament Results	☐
Injury Summary	☐	Referee Schedule	☐
Discipline Report	☐	Copies of ATF's	☐

Other Services Provided:

Washroom Facility	☐	First Aid	☐
Ambulance on Site	☐	Communications	☐

Any other relevant information or concerts you wish to advise the EODSA:

Does your club plan to run this tournament again next year on the same weekend? _____
Please list the dates of next year's Tournament:_____

Information provided in this report is true, any misleading or incorrect information shall be dealt with by the EODSA

Submitted By: _____ _____
Please Print Name Signature

Date: _____