

**LW SPECIAL OLYMPICS**

**PROPOSAL FOR TOURNAMENT OR EQUIPMENT**

SPORT: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

**TOURNAMENT PROPOSAL**

NAME AND LOCATION OF EVENT: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_

TOURNAMENT FEE: \$ \_\_\_\_\_

PAYABLE TO: \_\_\_\_\_

PAYMENT DUE DATE: \_\_\_\_\_ REGISTRATION DEADLINE: \_\_\_\_\_

# OF ATHLETES PARTICIPATING: \_\_\_\_\_ (must have SOO # to participate)

# OF COACHES PARTICIPATING: \_\_\_\_\_ (must be registered with SOO)

**VAN RENTAL (IF APPLICABLE):**

- # of vans required: \_\_\_\_\_
- Cost per van: \$ \_\_\_\_\_

**PLEASE LIST ANY ADDITIONAL FEES (IF APPLICABLE):**

- Specify item: \_\_\_\_\_
- Cost of item: \$ \_\_\_\_\_

**\*\*\*\*PLEASE NOTE: YOU MUST SUBMIT PROPOSAL AT LEAST 1 MONTH IN ADVANCE OF REGISTRATION DEADLINE (NO LATER THAN 2 WEEKS PRIOR, IF IT IS ADVERTISED LATE). ALL TOURNAMENTS AND PURCHASES OF EQUIPMENT MUST BE PRE-AUTHORIZED BY THE LWSO COMMITTEE\*\*\*\***

**EQUIPMENT REQUEST**

<u>ITEM REQUIRED</u>	<u># OF ITEMS</u>	<u>COST PER ITEM</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

TOTAL AMOUNT OF EQUIPMENT REQUIRED: \$ \_\_\_\_\_

NAME OF PERSON MAKING REQUEST: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

If you have any questions please contact Tracy Cormier at 519-978-0193 or myukon@aol.com