

PERTH LANARK 2026/2027 15TH ANNUAL DUEL COMPETITIVE B TOURNAMENT



Thank you for your interest in attending our DUEL Tournament which is scheduled to run Friday, October 23 to Sunday, October 25, 2026 from 8:00am to 8:00pm daily (Slight time changes to be determined closer to the date) Games will be played in both our Perth and Lanark Arenas.

We are planning for 6 teams in each Major Competitive B Division; U18, U15, U13, U11 with a 3 Game Guarantee

The first 6 teams in each level entered with accompanying payment & registration will be accepted.

The DUEL Tournament Entry Fee: \$ 1050.00

Preferred payment is by E-Transfer to plmha.treasurer@gmail.com Tournament Coordinator will inform you of password once registration is confirmed. Please remember to note your team and tournament you are submitting payment for in the message area of the E-Transfer.

You can also Postal Mail payment to the address below. Please make cheque payable to either **Perth Lanark Minor Hockey Association** or use the acronym **PLMHA** Please include team name and tournament level on the cheque (No post-dated cheques will be accepted)

Perth Lanark Minor Hockey Association
PO Box 441, Station Main
Perth, ON K7H 3G1

Your team's entry into our tournament will be confirmed by email when your completed team Registration and accompanying payment are received.

Please email a copy of your 'OFFICIAL TEAM ROSTER' signed by your District Registrar as soon as its available to you, at least 1 week prior to the Tournament date.

If **affiliated players** will be used in this tournament and they are not on your Official Team Roster, please send copies of your game sheets with the APs on them and a copy of their name on their Official team roster.

The tournament schedule, rules and information will be emailed to the Coach and Manager listed on the Registration form within a couple weeks of the tournament date.

If you should need any further assistance please visit our website at www.plmha.ca or email plmha.tournaments@gmail.com and the Tournament Coordinator would be happy to help out.

Yours in Hockey,
PLMHA



PERTH LANARK

MINOR HOCKEY ASSOCIATION

TOURNAMENT REGISTRATION FORM

TEAM ASSOCIATION:

TEAM NAME:

DATE OF TOURNAMENT:

MAIN TEAM CONTACT:

PHONE NO.:

E-MAIL:

JERSEY COLOURS:

HOME

AWAY

AGE DIVISION:

CATEGORY:

LEVEL:

Choose from Drop-down

(U7/U9/U11 ETC.)

(COMPETITIVE/HOUSE)

(A/B/C)

POSITION	NAME	PHONE NO.	E-MAIL
HEAD COACH:			
ASST. COACH:			
ASST. COACH:			
TRAINER:			
MANAGER:			

- E-mail Tournament Application Form to plmha.tournaments@gmail.com
- Remember to include your 'OFFICIAL TEAM ROSTER' signed by your District Registrar. This is required for all Category Levels in order to attend. If you do not have your Roster at time of Registration, please request this from your Association and email as soon as it is available/1 week prior to the Tournament date.
- Payment will secure your spot;
 - Etransfer to plmha.treasurer@gmail.com Tournament Coordinator will inform you of a password once registration is submitted and availability confirmed
 - Cheque made payable to PLMHA mailed to PO Box 441 Station Main Perth, ON K7H 3G1