



Minor Box/Youth Field Membership Renewal Application Form

Date: _____ Application for: Minor Box Youth Field

Name of Organization: _____

Contact Name: _____

Phone: (H) () _____ (B) () _____ (C) () _____

E-Mail: _____ Fax: () _____

Address: _____

City: _____ Postal Code: _____

Renew member for the 2017-2018 BC Lacrosse Association season.

The following information will be submitted by November 1, 2017.

Arena/Field Name: _____

Approved Boundaries: _____

The Association's Annual General Meeting is held during the month of _____

Board/Committee Contact List

Position	Name
President	_____
Vice-President	_____
Secretary	_____
Treasurer	_____
Coaching Co-ordinator	_____
Head Referee	_____
_____	_____
_____	_____

The following document is included:

Constitution and By-Laws

Please submit to:

B.C. Lacrosse Association, 101 - 7382 Winston Street, Burnaby, BC V5A 2G9 (604) 421-9755

E-Mail: deb@bclacrosse.com

FAX: (604) 421-9775