



# Blaine Youth Hockey Association

Blaine Youth Hockey Association - 9250 Lincoln St. NE - Blaine, MN 55434

## Tournament Check Request Form

Entry Fee \$:

Gate Fee \$:

Make Payable to:

Mail to:

Address:

City, State, Zip:

Tournament Date(s):

Team:

Notes:

**Requestor :**  
*Print Name >*

**Phone:**

Signature

**Date:**

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**Transactions will not be processed without a copy of receipts or invoices.**

Board Authorization :  
*Print Name >*

Signature

Date :

Payment Date :

BYHA Check # :

**STAPLE A COPY OF THE RECEIPT TO THIS PAYMENT REQUEST**