



Fundraising Permit

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Association: _____

Division: _____ Category: _____

Team Name (Including Sponsor): _____

Date of Fundraiser: _____

Briefly describe your fundraiser (if bottle drive include areas covered):

Team Manager/Coach Name: _____ Signature: _____

Association President/Executive: _____ Signature: _____

FOR OFFICE USE ONLY:	Date Received: _____
Hockey PEI Authorization: _____	Date: _____