



BC RINGETTE ASSOCIATION  
 420-789 WEST PENDER  
 VANCOUVER BC V6C 1H2  
 604-629-6568

## COME TRY RINGETTE INFORMATION SHEET

All information regarding your Come Try Ringette Event should be filled out below. Thank you.

### CONTACT INFORMATION

|                      |  |                      |  |
|----------------------|--|----------------------|--|
| NAME (EVENT CONTACT) |  | NAME (EVENT CONTACT) |  |
| EMAIL ADDRESS        |  | EMAIL ADDRESS        |  |
| PHONE                |  | PHONE                |  |
| ASSOCIATION          |  | ASSOCIATION          |  |
| ADDRESS              |  | ADDRESS              |  |

### EVENT INFORMATION

|                                   |  |          |  |
|-----------------------------------|--|----------|--|
| LOCATION                          |  |          |  |
| ADDRESS                           |  |          |  |
| DATE OF EVENT(S)                  |  |          |  |
| START TIME                        |  | END TIME |  |
| CONTACT INFORMATION FOR THE EVENT |  |          |  |

### EVENT DETAILS

|   |  |  |  |
|---|--|--|--|
| Skate and Helmet Rentals: Are they free?                                  |  |  |  |
| What to bring? (What clothing should participants wear)                   |  |  |  |
| What else is happening? (Demonstration; Gym Ringette; Face Painting etc.) |  |  |  |
| Participant Ages  |  |  |  |
| Additional Information  |  |  |  |

### EVENT WRITE UP - SAMPLE COPY FOR YOUR USE

|  |  |
|--|--|
| Come join <u>[INSERT ASSOCIATION]</u> on <u>[INSERT DATE]</u> for a FUN, FREE DAY at the rink trying out the game that we all love - RINGETTE! Come out to <u>[INSERT LOCATION]</u> , strap on some skates, grab a stick and a ring and try out the fastest game on ice! |  |
| What do you need to bring?   | All you need to participate is some warm clothes, a pair of gloves and a smile! If you have your own skates or helmet please bring those with you. |
| Anything else we should know for your event?   |  |

### ORDER REQUEST - LIST YOUR REQUESTED GIVEAWAYS

|   |  |
|---|--|
| PLEASE SEND TO OUR ASSOCIATION AT THIS MAILING ADDRESS: |  |
|   |  |
|   |  |
|   |  |
|   |  |