

8-Ball Provincial Host Application

Branch #	Branch name:	
Contact person(s) for the	his event:	
Phone number:	Email:	
•	ly late-April, changes based on Dominion): st 6 weeks before the Dominion competition.	
Location of opening ce	remonies / banquet:	
Number of hotel rooms	s within 10 minutes of facilities:	
Name(s) of proposed h	notels and rates (including all taxes):	
1)		Rate:
2)		Rate:
3)		Rate:
Will a block of rooms b	e available for participants? ☐ Yes ☐ No	If yes, how many?
Are there cabs or design	gnated driver programs available? □ Yes □	No
Shuttle service provide	d: 1) to/from ceremonies? Yes No 2)	to/from competition? \square Yes \square No
Competition location: _		
Number of tables available: Proposed cost per player (for 8-Ball):		
# of participants require	ed to break even on fixed costs (e.g. facility/	equipment rentals, etc.):
Location of closing cere	emonies:	
•	ormation that would help the committee selectors fees and how much you are planning o	•