



Minor Box/Youth Field Membership Renewal Application Form

Application for (select all that apply): Minor Box Youth Field

Name of Association: _____

Renew member for the 2026-2027 BC Lacrosse Association season.

Date: _____

Arena/Field Name: _____

Approved Boundaries: _____

The Association's AGM is: _____

Executive Contact List:

President Name: _____

Email & Cell: _____

Vice-President Name: _____

Email & Cell: _____

Vice-President Name: _____

Email & Cell: _____

Secretary Name: _____

Email & Cell: _____

Treasurer Name: _____

Email & Cell: _____

Registrar Name: _____

Email & Cell: _____

Head Coach Name: _____

Email & Cell: _____

Head Official Name: _____

Email & Cell: _____

Submit with the current copy of your Constitution and By-Laws & Certificate of Good Standing via email to debheard@bclacrosse.com by November 1st annually.