

Please follow these guidelines for a successful Catholic Order of Foresters (COF) tournament event. If your proposed event does not qualify under the guidelines, please submit pertinent information for High Court consideration.

HIGH COURT GUIDELINES FOR ALL COF TOURNAMENT EVENTS

- Apply for High Court allowance of \$250 per approved tournament or receive \$8 per participating COF member, whichever is greater. Members must be listed on submitted signature form.
- Give awards to entrants with valid COF membership—adult or youth.
- Limit group sponsorship to one tournament in each sport per calendar year, January 1 through December 31.
- Submit printed tournament location, date, and sponsoring group at least seven days prior to tournament's start.
- Submit completed tournament allowance with participant's signatures, within 30 days of event's closing date.
- Use High Court funds for award money, to purchase prizes, or for promotional purposes.
- Provide an itemized statement showing how High Court funds were used.
- Honor amateur status of youth participants no cash prizes.
- Welcome tournament guests and invite them to join COF. (Note: Non-member guests do not qualify for the \$8 per participating member allowance.)

If you have questions, contact Judy James, vice president of fraternal, 800-552-0145, extension 4937 or jjames@catholicforester.org.

Scan all tournament information and submit by email to: jjames@catholicforester.org



Submit for Home Office approval prior to planning your event.

APPLICABLE TOURNAMENT							
□ Basketball	□ Bean bag	□ Bowling	□ Card party				
□ Golf	□ Rolle Bolle	□ Softball	□ Volleyball				
SPONSORED	SPONSORED BY						
Sponsoring Loca	I Court Name/Numbe	er:					
TOURNAMEN	IT DETAILS						
Tournament Nam	ne:						
Date(s):	Date(s):						
Tournament Loca	ation:						
Tournament Add	Tournament Address/City/State/ZIP:						
	IT DIRECTOR IN	IFORMATION					
Name:			Phone:				
Address/City/Sta	te/ZIP:						
Email:							
CERTIFICATI	ON						

This tournament will comply with the High Court guidelines.

Name

Signature

Date



Tournament Name:

Date(s):

Tournament Address/City/State/ZIP:

MEMBER PARTICIPANTS

Member Name	Court Number	Member Name	Court Number
1.		26.	
2.		27.	
3.		28.	
4.		29.	
5.		30.	
6.		31.	
7.		32.	
8.		33.	
9.		34.	
10.		35.	
11.		36.	
12.		37.	
13.		38.	
14.		39.	
15.		40.	
16.		41.	
17.		42.	
18.		43.	
19.		44.	
20.		45.	
21.		46.	
22.		47.	
23.		48.	
24.		49.	
25.		50.	



Tournament Name:

Date(s):

Tournament Address/City/State/ZIP:

GUEST PARTICIPANTS (non-member)

Guest Name	Telephone	Guest Name	Telephone
1.		26.	
2.		27.	
3.		28.	
4.		29.	
5.		30.	
6.		31.	
7.		32.	
8.		33.	
9.		34.	
10.		35.	
11.		36.	
12.		37.	
13.		38.	
14.		39.	
15.		40.	
16.		41.	
17.		42.	
18.		43.	
19.		44.	
20.		45.	
21.		46.	
22.		47.	
23.		48.	
24.		49.	
25.		50.	



Please complete and submit this form within 30 days of the tournament's closing date.

TOURNAMENT DETAILS

Tournament Name:				D	ate(s):		
Tournament Location	:			Juriso	diction:		
Tournament Address	/City/State/ZIP:						
		NFORMAT	ION				
Name:				Р	hone:		
Address/City/State/Z	P:						
Email:							
	IAMENT AC	ΤΙVΙΤΥ					
 Type: □ Basketball	🗆 Bean Bag	□ Bowling	□ Card Party	□ Golf	Rolle Bolle	□ Softball	□ Volleyball

Number of Teams: Number of Participants:

List courts represented and number of participating members. Use the back of the sheet for additional space.

Court Number	Participants	Court Number	Participants	Court Number	Participants

Allowance award: \$250 per approved tournament or \$8 per valid member, whichever is greater.					
		 □ If less than 31 valid participants, receive a flat \$250. □ If 32 or more valid participants, receive \$8 per member. 			
TOTAL ALLOWANCE AWARD					

Check will be made payable to the following Local Court:

CERTIFICATION

I certify the above information is correct.

Tournament Director Signature:

Date: