



Howick Minor Hockey 2018 Tournament Registration Form

Saturday January 12th & Sunday January 13th
Atom LL & Atom Rep/AE
\$ 550 / team

Each team is guaranteed 3 games
Lunch provided to each player and coach
Entry fees include door admission
Take-away gift for each player
Trophy's for all 'A' Champions and Finalists

COMPLETE THE SECTION BELOW & MAIL WITH PAYMENT TO:

Miranda deBoer
42602 Orangehill Rd. Bluevale, ON N0G 1G0
519-335-4488
mandmdeboer@wightman.ca

Cheques payable to: Howick Minor Hockey Association
Or e-Transfer to hornets@howickminorhockey.com

POSTDATED CHEQUES NOT ACCEPTED

Teams cancelling within 14 Days of Scheduled Tournament date will be subject to a \$50.00 Cancellation Fee.

Please mark which tournament you are registering for:

- Atom Rep (C-DD) / Atom AE (Group 4 & Group 5)
- Atom LL

NAME OF TOWN / CENTRE: _____ TEAM NAME: _____

TEAM CONTACT: _____ TEAM CONTACT E-MAIL: _____

PHONE: _____ ADDRESS: _____

TEAM CLASS (C-DD): _____ TEAM COACH: _____

All coaches, trainers and players must be on the OMHA Approved Team Roster. Please print player's names, coach's names, trainer's names and numbers on the tournament signature sheet. Teams must be OMHA affiliated and cannot be a major team.

Note: Acceptance of a team entry releases the Tournament Committee and Officials and anyone connected with the Tournament from any liability for injury or accident incurred by a player or Team Official while attending or participating in the Tournament

2018 Player Registration Form

Center

OMHA Classification

Team Name

Sweater Colour

1 _____ 2 _____

Please print clearly the requested information. Only players listed on the team roster will be allowed to play in the tournament.

Players Name	Sweater #	Position

Position	Please Print		Number
Coach		NCCP #	
Trainer		HTCP #	
Manager			
Ass. Coach		NCCP #	

YOU MUST PROVIDE YOUR OMHA APPROVED ROSTER & TRAVEL PERMIT PRIOR TO THE TOURNAMENT FOR THE TOURNAMENT CONVENOR.