

South Kent Minor Hockey Association

www.southkentminorhockey.ca



The Mark Woodley/Len Hoskins Memorial Tournament

December 14th – 16th, 2018

**Novice, Atom, Peewee, Bantam, and Midget Local League Teams
OMHA Sanctioned**

The tournament is for Novice, Atom, Peewee, Bantam, and Midget Local League Teams only. Team acceptance into the tournament will be based on receipt of tournament fees, OMHA approved roster, and completed team/player registration forms.

Entry fee: \$575.00

Gate fee: Adults of \$4.00 per day or a \$10.00 weekend pass.

Please forward the attached/enclosed application form to:

Perry Short
11169 Front Line
Blenheim ON
N0P1A0
Phone 5198090059
EMail: Woodley-Hoskins@SouthKentMinorHockey.com

Please make cheques payable to SKMHA.

OMHA sanctioned tournament # TBA. OMHA rules apply.
South Kent Minor Hockey Association (RMHA) has the right to refuse any application.

OMHA TOURNAMENT RULES AND REGULATIONS

1. Each player must produce an approved CAHA recognized playing certificate for the current playing season.
2. All other OMHA tournament rules and regulations will be in effect during this tournament.
3. Any player or team official suspended in the tournament shall serve it as per rule 8.2 section B.
4. One member of the team's management must remain in the dressing room after the game until the last player has left, and hand in the dressing room key.
5. The tournament committee is not responsible for lost or stolen items during the tournament.
6. The team coach and/or manager shall ensure that two responsible adults, who have received the Abuse & Harassment training and have passed a Police Record Check, remain in the dressing room with the team at all times to control discipline.

TOURNAMENT FORMAT

1. Each team is guaranteed three games.
2. Tournament point system and format will be determined based on the number of entries per division.

Mark Woodley Christmas Classic Entry Form

PLEASE PRINT

TEAM NAME:	
CENTRE / CLASSIFICATION:	
DIVISION:	
AFFILIATION EITHER OMHA OR OTHER:	
MANAGER'S NAME:	
ADDRESS:	
CITY, POSTAL CODE:	
TELEPHONE: HOME()WORK()	
OTHER CONTACT INFORMATION (CELL/EMAIL)	
COACH'S NAME:	
ADDRESS:	
CITY, POSTAL CODE:	
TELEPHONE: HOME()WORK()	
OTHER CONTACT INFORMATION (CELL/EMAIL)	

Please Note: Acceptance of a team entry releases the Tournament Chairman, Tournament Committee and Officials, Tournament Sponsors, Arena Management and all connected with the tournament from any liability for the injury or accident incurred by a Player or Team Official while attending or participating in the Tournament.

TOURNAMENT CONTACT NAME:	
EMAIL ADDRESS:	
HOME PHONE:	
CELL PHONE:	

PRINT NAME:		SIGNATURE:		DATE:	
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