

Door Prizes and Team Prizes
Registration fees include player
commemorative T-Shirts, a burger and beverage.
Fees due by Friday March 5th



Proceeds of
Tournament go to
The Regina Outdoor
Hockey League

Annual District Shiny Showdown - March 6, 2010

Game Rules:

- | | |
|---|--|
| U Mixed teams | U Helmets not required |
| U Five on Five including goalie | U The team that is scored against is given centre ice before the opposing team can go after the puck |
| U No restriction as to male/female team member ratio | U Shoot-out in case of Tie |
| U No slap shots | U 20 minute games - no switching ends |
| U Stick blade must stay below the knee | U Maximum limit 10 members per team |
| U No body contact | U Players must be 19 years or older |
| U All players maintain order and agree on penalties (no referees) | U Maximum Tournament Registration: 10 Teams |

The **Captain** is responsible for the conduct of his or her team and will be required to have each player sign a Regina Warehouse District Release of Responsibility Waiver Form prior to entry onto the rink.

Registration Information [Please print]:

Entry Fee: \$20 per player, payable to: Regina's Warehouse Business Improvement District

Fees due by Friday, March 5, 2010;

Mail or drop cheques to: Regina's Warehouse District office,
 202 - 1275 Broad Street, S4R 1Y2 (Broad and 7th Avenue)
 (Registration fees include player commemorative T-Shirts.)

Team Name:

Team Captain: **Captain's Phone number:**

Team Players' names:

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***All players MUST SIGN WAIVER PRIOR to Playing**

DISTRICT SHINNY SHOWDOWN WAIVER: I agree to Regina's Warehouse Business Improvement District Shiny Showdown tournament rules as outlined and understand that I accept full responsibility for my own welfare during this tournament. I understand that Regina's Warehouse Business Improvement District is not responsible for any injury to participants that may occur during this tournament.

TEAM INFORMATION:

Team Name:

Team Captain: Captain Phone Number:

PLAYER INFORMATION:

Name: Sask Health Number:

Emergency Contact Information: Signature: