



Burlington Bulldogs 2010 MD Challenge Cup



Fri. Dec. 3rd - Sun. Dec. 5th, 2010

TOURNAMENT INFORMATION

Tiered Novice Division	Top 4 teams advance to Semi- Finals
NO GATE FEES!	Tournament Fee \$850 CDN
CHAMPIONSHIP CUP and Individual Awards for Finalists & Champions	NO TIES! 3 Games Guaranteed

TOURNAMENT INFORMATION

- ✘ Alliance Hockey Sanctioned #11-019
- ✘ Alliance MD equivalent to OMHA AE, House League Red & USA BB Teams.
- ✘ Full Tournament Rules available at www.blomha.on.ca
- ✘ Entries will be accepted on a first come, first serve basis.
- ✘ All tournament entry fees (\$850) must be paid in full before a team is allowed to compete.
- ✘ Payment can be made by **Cash** or **Cheque** only. Please make cheques payable to BLOMHA.
- ✘ A Deposit of \$100 is to be paid upon applying
- ✘ Balance of fee must be paid by Friday, October 15th, 2010
- ✘ An administration fee of \$100 will apply to any withdrawal
- ✘ Absolutely NO REFUNDS after November 1st, 2010. Teams not accepted will receive a full refund.
- ✘ Approved Hockey Canada Rosters & Travel Permits must be submitted by November 1st, 2010.
- ✘ Daytime & Evening Games. Schedule to start at 7:00am on Friday.
- ✘ Game Schedule will be forwarded to the team contact no sooner than 2 weeks prior to the tournament.
- ✘ Teams must play in the division of their eldest player (a team with Minor & Major Atom players must play in Major Atom). Each team shall have a minimum roster, including 1 goaltender of 11. All AP's must appear on the approved roster and are subject to approval in advance of the tournament by the Tournament Committee.
- ✘ All Hockey Canada playing rules shall be enforced.
- ✘ To secure your spot, please forward your completed Registration Form, Team Roster Form & Payment to:

BLOMHA
Attn: Burlington Bulldogs MD Challenge Cup
3455 Fairview St
Burlington, ON
L7N 2R4

To contact the BLOMHA Office, please call 905.637.0731 or email us at kelly@blomha.on.ca

Tournament Open to the following Rep MD Divisions:
(Body checking at Minor Pee wee and above)

- ✘ Novice Tier 1 (2003/2002)
- ✘ Novice Tier 2 (2003/2002)
- ✘ Novice Tier 3 (2003/ 2002)
- ✘ Minor Atom (2001)
- ✘ Atom (2000)
- ✘ Minor Pee wee (1999)
- ✘ Pee wee (1998)
- ✘ Minor Bantam (1997)
- ✘ Bantam (1996)
- ✘ Minor Midget (1995)
- ✘ Midget (1994 & 1993)



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REGISTRATION FORM

** Please NO @mountaincable.net email addresses**

DIVISION	
TEAM NAME	
CITY & ASSOCIATION	
ASSOCIATION CONTACT	
ASSOCIATION PHONE #	
TIER (Novice Only)	
SWEATER COLOURS	HOME
BODY	
TRIM	
	AWAY
BODY	
TRIM	
TEAM CONTACT	
POSITION	
PHONE NUMBER	
EMAIL	
ALT. PHONE NUMBER	
ADDRESS	
ALT. CONTACT	
POSITION	
PHONE NUMBER	
EMAIL	
ALT. PHONE NUMBER	
ADDRESS	

In signing this form, the signee, on behalf of his/her team, agree to waive, indemnify and hold harmless BLOMHA and all sponsors of the tournament for any loss or injury incurred by any player or team official while participating in said tournament. The signee acknowledges and agrees that BLOMHA reserves the right to use any photographs or videos taken during the tournament for advertising contained herein.

Signature: _____

Date: _____

TOURNAMENT USE ONLY

Rec'd:

Deposit Fee

Chq. Name:

Chq #:

Chq. Date:

Chq. Deposited:

Balance of Fee

Chq. Name:

Chq #:

Chq. Date:

Chq. Deposited:

Date Confirmed:

FEE: \$850
(\$100 Deposit due upon applying)
(\$750 can be post dated to Oct. 15)

MAIL TO: BLOMHA
Bulldogs MD Challenge Cup
3455 Fairview St.
Burlington, ON
L7N 2R4

PHONE: 905.637.0731
EMAIL: Kelly@blomha.on.ca



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TEAM ROSTER FORM

*An Approved Hockey Canada Roster must be submitted by Monday, November 1st, 2010

TEAM NAME	
DIVISION	
ASSOCIATION	

PLAYER'S NAME	SWEATER #	BIRTH DATE (MMM-DD-YYY)
1. GOALIE		
2. GOALIE		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		

*Please indicate with a star your AP's if any or attach a separate sheet with AP's, Thank You.

HEAD COACH	
ASS'T COACH	
ASS'T COACH	
ASS'T COACH	
TRAINER	
MANAGER	