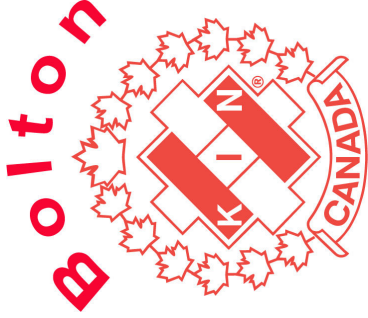


## Structure & Rules

- There will be divisions of 4 teams each. During round robin play, each team will play one game against another in its own division to establish a division winner. All teams progress to the play-off series.
- Round robin play will have teams playing simultaneously on 4-6 rinks. Teams score 2 points for a win, 1 for a tie.
- There are no overtime periods in round robin play. During playoff games only, teams will play a 3-minute overtime period in the case of a tie. The team that scores the most will be declared the winner. If the score remains tied at the end of the 3-minute overtime period, play will continue unabated and the first team to score wins.
- The rink measures approximately 150' x 75' or such size as can best fit given ice conditions. The goal net is conventional 6ft. width but only 25 cm (10 inch) high.
- All players must wear helmets and hockey skates. Other protective equipment is optional but highly recommended.
- No goalie equipment or goalie sticks permitted.
- All teams must have matching light and dark jerseys or uniforms.
- Any major penalty, which includes any action that could possibly injure another player, spectators or officials, will result in the ejection of the offending player from the rest of the tournament. The team that receives the ejection will play the remainder of the tournament short-handed (3 vs. 4).
- No checking is allowed. Such action will result in a minor penalty unless deemed serious enough to be a major.
- No Slapshots allowed. Such action will result in a minor penalty.
- There are no off-sides or icing calls.
- The organizing committee reserves the right to prohibit any player or team from participating if they are deemed to cause safety concerns
- The organizing committee reserves the right to add or delete rules. Teams will be informed of changes via our web site and/or at the pre-tournament orientation meeting.

Visit our web site!  
[www.canadianpondhockey.ca](http://www.canadianpondhockey.ca)



—Registration Fee—  
Before Feb. 15—\$300  
Before Feb. 22—\$350

### By Cheque

(make cheque payable to)

Kinsmen Club of Bolton  
35 Chapel Street  
Bolton, Ontario  
L7E 1C2

### By Credit Card

Visa  MasterCard  American Express

Card Number

Print Name as on card

Expiry Date

Signature

Note: Credit Card transactions will be processed through  
Altecon Data Communications

February 26 - 27  
2011

Palgrave  
Mill Pond

Caledon, Ontario  
Canada

# Team Registration

## Waiver & Registration

### READ AGREEMENT BEFORE SIGNING

Name: \_\_\_\_\_  
Signature \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_  
Phone Number ( ) - \_\_\_\_\_

CAPTAIN

Name: \_\_\_\_\_  
Signature \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_

Player 2

Name: \_\_\_\_\_  
Signature \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_

Player 3

Name: \_\_\_\_\_  
Signature \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_

Player 4

Name: \_\_\_\_\_  
Signature \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_

Player 5 (Optional)

## Agreement Regarding

### Risk Of Injury and Release Waiver of All Claims

I hereby apply to participate in the Kinsmen Canadian Pond Hockey Championship (the "Championship") at:

Palgrave Mill Pond

February 26-27, 2011.

I understand that participating in the Championship will expose me to above normal risks of injury or harm. These risks include uneven or hazardous playing surfaces, physical contact or collisions with other players, spectators or inanimate objects on or about the rink. I understand that the sport of hockey is in itself hazardous and may result in injury to me or other players.

I represent that I have no health or physical problems that will interfere with my participation in the Championship. I agree that I am responsible for my own safety.

I hereby assume all risks associated with my attendance and participation in the Championship. I further agree that my attendance, play and participation in the Championship shall be at my sole risk and decisions as to whether or how I play shall entirely be my responsibility.

I hereby fully and forever release, discharge and agree not to sue the Kinsmen Club of Bolton, Inc. ("Kinsmen"), the Toronto & Region Conservation Authority ("TRCA"), The Town of Caledon, County of Peel and any Championship Sponsors, their officers, directors, agents, employees, representatives and successors for any and all claims, causes of action or liability for any injury, loss or damage sustained or incurred by me arising out of or in any way associated with

my attendance at or participation in the Championship, including all claims, causes of action or liability arising out of the negligence of Championship sponsors, their agents or representatives. I agree to indemnify and hold harmless the Kinsmen, the TRCA and Championship sponsors, their agents, or representatives from any loss, damage or expense sustained or incurred by them arising from any such claims, cause of action or liability, whether brought by me, anyone acting on my behalf, or by anyone else because of conduct attributed to me.

I agree that this agreement shall be construed and interpreted according to the laws of the Province of Ontario. I understand and agree that this Release and Waiver shall be binding upon my heirs, assigns, and any personal entity acting upon my behalf, including a parent or guardian.

I have read the above items of the Release and Waiver and Registration Procedures, understand them, and agree to abide by them, and hereby acknowledge with my signature hereon that I have read and understand this Release and Waiver and Registration Procedures.

#### Team Information

Name: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ Prov/state/Zip/Postal Code \_\_\_\_\_

Team email address (MANDATORY) \_\_\_\_\_

Division \_\_\_\_\_