



## **Greater Milwaukee 1<sup>st</sup> Annual High School & Alumni 3v3 Tournament**

**We anticipate each team entering in the hopes to gain bragging rights for Milwaukee Area High School Hockey along with great hockey competition.**

This game is an amazingly fast half ice game similar to half court basketball (Gus Macker). Upon change of possession, the puck must be cleared outside the blue line with all offensive players touching up prior to becoming involved in the play. The goalies compete as individuals and stay extremely busy playing with and against both teams.

All teams are guaranteed 3 games, with the possibility of playing 4, 5, or even 6 games in this modified double elimination format.

There will be **NO** checking and absolutely **NO** fighting allowed. Each team must have **FOUR** players and one Adult coach. The game will be three 6 minute running time periods and have one referee. This small area game can become very competitive and exciting if each individual follows the rules. Failure to follow the rules by any individual on the team will result in the entire team being disqualified from the tournament.

If you would like additional information, feel free to call Jinelle at (608) 628-2144 or email to: [Jinellelynn@gmail.com](mailto:Jinellelynn@gmail.com)

### **Tournament Cost:**

- **\$200 per Team**
- **\$50 per Player**
- **\$40 per Goalie**



# Greater Milwaukee 1<sup>st</sup> Annual High School & Alumni 3v3 Tournament

May 20 - 22, 2011

Application Deadline: April 30, 2011

## Registration

Once you have mailed your registration, please send an email to [Jinellelynn@gmail.com](mailto:Jinellelynn@gmail.com) stating that you have mailed your registration and what level your team will play at.

Association: \_\_\_\_\_

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

Team Colors: \_\_\_\_\_

Coach: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ zip: \_\_\_\_\_

Email Address \_\_\_\_\_

Phone: \_\_\_\_\_

Class:

\_\_\_ HS Boys      \_\_\_ HS Girls

\_\_\_ Alumni Boys      \_\_\_ Alumni Girls

Team Contact: \_\_\_\_\_

City: \_\_\_\_\_

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

State: \_\_\_\_\_ zip: \_\_\_\_\_

Email Address \_\_\_\_\_

Phone: \_\_\_\_\_

Circle One:    Team Registration    Goalie Registration

Roster:

1) \_\_\_\_\_ D.O.B. \_\_\_\_\_

2) \_\_\_\_\_ D.O.B. \_\_\_\_\_

3) \_\_\_\_\_ D.O.B. \_\_\_\_\_

4) \_\_\_\_\_ D.O.B. \_\_\_\_\_

Tournament Cost - \$200 per team or \$40 per Goalie

Payment in full to: Arrowhead Blue Line Club (BLC)

Return this form and waiver

Mail to: Greater Milwaukee attn: Jinelle Siergiej

700 North Avenue,  
Hartland, WI 53029

Or for additional information call Jinelle (608) 628-2144 or e-mail [jinellelynn@gmail.com](mailto:jinellelynn@gmail.com)

# WAIVER AND RELEASE



The undersigned wishes to participate in Greater Milwaukee 3v3 Hockey Tournament, fully understanding and appreciating the inherent risks involved in the event, including, without limitation, the risks inherent in the sport of ice hockey, which include injury from pucks, skates and sticks, and injury from collision with fellow competitors or with the goal, the ice, or the boards surrounding the rink. For myself, my heirs and legal representative, I do hereby release, indemnify and agree to hold harmless the Mullett Ice Center and its sponsors and promoters of this program, and their respective officers, directors, representatives,

employees and agents, and all volunteers and other participants and fellow competitors, of and from any and all losses, costs, damages, claims, demands, rights, and causes of action of whatever kind or nature, including any and all negligence claims or causes of action which result from illness, personal injuries, property damage, death or of any other damages or injuries occurring during or as a result of my participation in the Greater Milwaukee 3v3 Hockey Tournament.

In further consideration of my being granted the right to participate in the Greater Milwaukee 3v3 Hockey Tournament, I do hereby consent to and authorize the Mullett Center to obtain emergency medical treatment for me if I am injured during my participation in the event. I agree that I will be responsible for any medical costs incurred with respect to such emergency medical treatment. I acknowledge that the Mullett Center, its sponsors and promoters, and their respective agents, employees and volunteers are not medical service providers, and I agree to release, indemnify, and hold harmless the Greater Milwaukee 3v3 Hockey Tournament, and Mullett Center its sponsors and promoters, and their respective officers, directors, representatives, employees and agents, from any claim or cause of action whatsoever arising out of the administration of emergency medical treatment to me.

I agree to adhere to and abide by all safety rules and regulations of the Greater Milwaukee 3v3 Hockey Tournament, including the wearing or use of any required safety equipment or clothing.

I am of legal age and am fully competent. I have read this Waiver and Release and fully understand it. If I am not of legal age, I acknowledge that my parent or legal guardian whose signature appears below has read this form.

Date: \_\_\_\_\_

\_\_\_\_\_  
Participant signature

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Print name above

\_\_\_\_\_  
Print name above

Age: \_\_\_\_\_