



1st Annual Summer Shootout

(Friday 7/31/2009 to Sunday 8/2/2009)

Last time you were in your garage did you come across your old roller hockey skates?
Do you and your buddies talk about getting together for a pickup game down at the rink?
Well its time to dust off those old skates and get the boys together for the 1st annual
Under 25 Summer Shootout 3 on 3 Tournament!

Eligibility - All players must turn at least 16 this year and can be no older than 24 at start of tournament.
So your birth date must fall between 7/31/1984 & 12/31/1993.

Registration - \$150 per team regardless of the number of players on the team. To register complete the form on the back of this flyer and mail in with payment by Saturday 7/25. Space is limited , so register quickly!

Insurance - Each player must be insured through USA Hockey Inline (no other types of insurance are valid).

If you already have insurance for '08-09 with USA Hockey Inline, provide your ID number on the registration form.

If you do not currently have USAH Inline insurance, this will be handled on-site at check-in. The fee is \$10 per player.

Do not insure in advance online (the fee is \$25 and will expire on 8/31/09). Players under 18 require the signature of an adult.

Rosters - Participants must assemble a team of at least 4 players and 1 goalie but no more than 6 skaters and 1 goalie. Teams will be required to bring 2 sets of jerseys, one dark and one light colored.

Games - This is a round robin tournament (3 game guarantee). Games consist of (3) 8-minute periods(running time). Games can be scheduled Friday 7/31 (5:30pm - 10:30pm), Sat 8/1 (8:30am - 9:30pm), Sun 8/2 (8am - 6pm)

Prize - Tournament Champions recieve a free entry into next years Summer Shootout!

If you have any questions or need any further information you can contact us:

Phone (516) 702-9226 or E-Mail jjrollerhockey@yahoo.com

Facebook "1st annual Under 25 Summer Shootout 3 on 3 Tournament" event.

MAKE ALL CHECKS PAYABLE TO JOHN J. McMAHON JR. MEMORIAL ROLLER HOCKEY CLUB, INC.

MAIL FORMS AND CHECKS TO:

John. J. McMahon Roller Hockey

P.O. BOX 2586

NORTH BABYLON, NY 11703

*** Registration Deadline Saturday July 25th***

***Player 1 & Team Captain**

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone Number _____ E-Mail _____
USA Hockey Inline ID# _____

Player 2

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

Player 3

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

Player 4

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

Player 5

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

Player 6

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

Goalie

Address _____ Town _____
Zip Code _____ Date of Birth _____
Phone # _____ E-Mail _____
USA Hockey Inline ID# _____

** Indicates the team captain/contact that is responsible for the payments and contacting the rest of their team. All payments must be in full.*