



USDHF

2024 Intent To Participate Form www.mystreethockey.com

DIVISIONS: Penguin Div (7. 8. 9) * Beaver Div (10.11.12) * Cadet Div (13.14.15)
* Cadet Major (16.17.18) * Senior Divisions (16 & Older) * Masters (40 & Older)
* **Age Eligibility: January 1st 2024 for all events**

DIVISION: Indicate Division / Caliber of the Team A” B” - Other _____
Indicate the best day & time your team can play. _____

Team Name: _____

Contact Name: _____

Contact Address: _____

City _____ **State/Prov** _____ **Zip/Postal Code** _____

Contact Phone: () _____ Cell/

Other _____

Contact Fax: () _____ **E Mail** _____ @ _____

Is your team representing a sanctioned league, playing by the USDHF Rule Book?

Does your team have matching properly numbered shirts? Color _____ **No?** _____

Note: The USDHF Officials have the right to disqualify any team with illegal shirts.

I _____ **have read the Rules & Regulations & agree abide by the R & R Please sign Person in charge (Sign):** _____

Return this form and a non-refundable cashier's check, money order or CC in the amount of _____ **Tournament Fee or Deposit of \$300 to:**

T & C Sports in USA /Canada

P.O. Box 1066

Leominster, MA 01453

2024 Tournament Fee's \$750.00 unless indicated on Event Flyer

For Office Use Only:

Accepted By: _____

Waiting List: _____

Misc: Pay Pal _____

HOTEL Name: _____

Division: _____

Amount received: _____

Check/M.O. # _____

Balance Due: _____

Hotel Phone # () _____