



# 7<sup>TH</sup> ANNUAL DARE

ATOM AND PEE WEE HOUSE  
LEAGUE HOCKEY TOURNAMENT  
NOVEMBER 20,21& 22, 2009  
TIM HORTON EVENT CENTRE  
COCHRANE, ONTARIO

SPONSORED BY: **DARE**

HOSTED BY: COCHRANE MINOR HOCKEY ASSOCIATION

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AN APPLICATION FORM, TOURNAMENT RULES,  
FORMAT AND GENERAL INFORMATION ARE  
ENCLOSED FOR YOUR REFERENCE

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ENTRY DEADLINE - OCTOBER 30, 2009

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FOR FURTHER INFORMATION, PLEASE CONTACT:

Vicki Martin

(705) 272-5888

FAX: (705) 272-5815

E-MAIL: [cmha@puc.net](mailto:cmha@puc.net)

## **TOURNAMENT FORMAT:**

1. All players of Atom and Pee Wee age registered with the C.H.A. or its affiliates will be eligible to play.
2. Our tournament is sanctioned by the N.O.H.A.
3. All teams playing in the tournament will be guaranteed three (3) games.

## **TOURNAMENT PLAYING RULES:**

1. All C.H.A., O.H.A. and N.O.H.A. rules are in effect.
2. Permits to attend our tournament **MUST BE OBTAINED FROM THE N.O.H.A.** or its affiliates.
3. First aid will be available at the tournament.
4. All three periods will be 10 minute stop time periods.
5. Mercy Rule: If there is a seven goal spread at the beginning of the third period, the third period will be played straight time.

## **TIE BREAKER RULE:**

The tournament shall follow the N.O.H.A. Tie Breaker Rules. Copies of these rules will be available in the tournament office.

## **GENERAL INFORMATION:**

Player cards (including affiliated players and staff) must be presented at registration. The tournament permit must also be presented at registration.

## **INJURIES:**

The Tournament Committee and/or the arena management will not assume liability for any injury to any player or team official participating in the tournament.



**[COCHRANE MINOR HOCKEY ASSOCIATION INC.**

**P.O. Box 2038  
Cochrane, ON  
POL 1C0**

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**D.A.R.E. ATOM AND PEE WEE HOCKEY  
TOURNAMENT  
REGISTRATION FORM**

**ATOM** \_\_\_\_\_

**PEE WEE** \_\_\_\_\_

**TEAM CONTACT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NO:** \_\_\_\_\_ **FAX NO.** \_\_\_\_\_

**TEAM NAME:** \_\_\_\_\_

**COACH:** \_\_\_\_\_

**MANAGER:** \_\_\_\_\_

**ACCEPTANCE:** All teams will be notified of acceptance.

**We hereby register our team in the D.A.R.E. Atom and Pee Wee Hockey Tournament and have enclosed a cheque or money order for \$500.00 payable to Cochrane Minor Hockey Association, Box 2038, Cochrane, ON P0L 1C0. Gate fees apply to all spectators \$10 Adult/\$7 Student**

**We certify that all players are eligible to participate in this tournament and are registered to this team.**

**TEAM AUTHORIZED SIGNATURE:** \_\_\_\_\_

**NAME - PLEASE PRINT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_





## **[COCHRANE MINOR HOCKEY ASSOCIATION INC.**

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**[www.cochranemha.com](http://www.cochranemha.com)**

### **ACCOMMODATION GUIDE**

**Westway Motel  
Telephone: 272-4285  
Facsimile: 272-4429**

**The Station Inn  
Telephone: 272-3500  
Facsimile: 272-5713**

**Best Western Swan Castle Inn  
Telephone: 272-5200  
Reservation Centre: 1-800-528-1234  
Facsimile: 272-4299**

**North Adventure Inn  
Telephone: 272-6683  
Facsimile: 272-6231**

**Thrift Lodge  
Telephone: 272-4281  
Facsimile: 272-4230**

**Chimo Motel  
Telephone: 272-6555  
Facsimile: 272-5666**

**Golden Gate Motel  
Telephone: 272-5498  
Facsimile: 272-3029**

**Commando Motel  
Telephone: 272-2700**