



2011 PROWLER CUP

HOCKEY SERIES



Tournament Fee

\$600

No gate fee!

Tournament Features

Pool Play

4 game guarantee for age groups

3 game guarantee for High School

All games 17 minute stop-time periods

USA hockey rules followed

Fully-Insured (not a USA Hockey event)

No gate fees

SCHEDULE

Apr 29-May 1	Boys 1999	June 3-5	Boys 1998
May 6-8	Boys 2000	June 10-12	Girls High School
May 13-15	Boys 2001	June 17-19	Boys High School
May 20-22	Boys 1997	June 24-26	Boys 2002/2003

Thief River Falls Amateur Hockey Association

**Contact person: Derek Lee
218-684-5477**

PO Box 6
Thief River Falls, MN 56701
Phone: 218-681-1350
Fax: 218-681-5919
E-mail: dleplumbing@mncable.net

Team Name _____

Contact _____

Address _____

City, State, Zip _____

Phone _____

Cell Phone _____

E-mail _____

Method of Payment

Check-payable to TRFAHA

MasterCard

Visa

Credit Card # _____

Exp. date _____

Signature _____

Tournament Sign up

Age group:

<input type="checkbox"/> Boys High School	June 17-19	\$600
<input type="checkbox"/> Girls High School	June 10-12	\$600
<input type="checkbox"/> Boys 1997	May 20-22	\$600
<input type="checkbox"/> Boys 1998	June 3-5	\$600
<input type="checkbox"/> Boys 1999	Apr 29-May 1	\$600
<input type="checkbox"/> Boys 2000	May 6-8	\$600
<input type="checkbox"/> Boys 2001	May 13-15	\$600
<input type="checkbox"/> Boys 2002/2003	June 24-26	\$600

Prowler Hockey

Total: _____

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HOCKEY SERIES



2011 Summer Prowler Cup Series

Waiver and Release of Liability

(Must be filled out by each player before 1st game)

NO EXCEPTIONS!

In consideration of being allowed to participate in the 2011 Summer Prowler Cup Hockey Series, related events and activities, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis or death, and while rules, equipment, and personal discipline may reduce the risk, the risk still exists, and
2. I **knowingly and freely assume all such risks**, both known and unknown, **even if arisen from the negligence of the releases** or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin **HEREBY RELEASE AND HOLD HARMLESS** the City of Thief River Falls, the Thief River Falls Amateur Hockey Association and their affiliated arenas, their officers, officials, agents and or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owner and lesser of premises used to conduct the event (**"Releases"**), **with respect to any and all injury, disability, death**, or loss or damage to person or property, **whether arising from the negligence of the releases or otherwise.**

I HAVE READ THIS RELEASE OF LIABILITY AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, FOR PARTICIPATION UNDER THE AGE OF 18

This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent to his/her release as provided above all the releases, release and agree to indemnify the Releases from any and all liabilities incident to my minor child's involvement in these programs.

Mother Signature

Date

Father Signature

Date

Participant Signature

Date

Thief River Falls Amateur Hockey
Association