**Ice Breaker Hockey Tournament**

**Rules and regulations**

**Eligibility:** This is an NOHA Sanctioned tournament. All teams must be registered with

NOHA for insurance purposes.

**Permits:** All teams must submit their permit and approved roster before 1st scheduled game.

**Protests** NO PROTESTS! Misunderstandings may be reviewed by the tournament

rules committee for final decision.

**Playing Rules:** C.H.A. rules will be in effect.

**Team Colors:** Home team will wear white. In the event of conflicting colors, the home

team will wear the alternate sweaters.

**Game Times:** 12/12/12 minute stop time periods. Straight time will be in effect after a (5)

goal spread in the 3rd period only. It will remain straight time for the

remainder of the game even if the margin is reduced to less than (5) goals.

All teams are expected at the arena at least one hour prior to game time

and be prepared to play thirty (15) minutes prior to scheduled game time.

**Tournament point scoring:**

During round robin play, each team will receive a point in case of tie.

No overtime.

Tied position after round robin will be determined by NOHA FORMAT.

During semi-finals and finals, if tied at end of regulation play, 5 minute

Sudden death – (2) skaters and (1) goalie until decision.

(Penalty – add a player to ice)

**All teams guaranteed “Four Games”**

**Games will be played at the Carlo Catterello (Barn), Whitney and McIntyre Arena**

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| **ICE BREAKER TOURNAMENT 2017**  **South Porcupine, Ontario**  **START DATE**: **Thursday Oct. 12, 2017** **END DATE**: **Sunday Oct.15, 2017** **DEADLINE**: **Sept.19 , 2017**  **GENERAL INFORMATION**  **TEAM NAME**:  **DIVISION**:  LEAGUE/ASSOCIATION:  JERSEY COLORS : HOME\_\_\_\_\_\_\_\_\_\_\_\_ COLOUR\_\_\_\_\_\_\_\_\_\_\_  **CONTACT PERSON**  NAME:  ADDRESS:  HOME PHONE:  CELL PHONE:  EMAIL :  **HEAD COACH**  NAME:  ADDRESS: HOME PHONE:  CELL PHONE:  EMAIL :  **TEAM ROSTER**  MANAGER:  ASSISTANT COACH:  ASSISTANT COACH:  ASSISTANT COACH  TRAINER:  **PLAYERS**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | NO | First Name | Last Name | Birth Date  Mm/day/year | Position | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  |   Top of Form   |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  |   Bottom of Form |
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