



10th Annual Silver Stick Sled Hockey Finals
February 1st & 2nd , 2020
Angola, Indiana

Turnstone is proud to host the 10th Annual Silver Stick Sled Hockey Finals for youth. Silver Stick is an international organization that has more than 65,000 hockey participants. The mission of this non-profit organization is to promote citizenship and goodwill through the sport of hockey and has expanded its mission to include Sled (Sledge) Hockey. This event is a USA Hockey sanctioned tournament for youth sled (sledge) hockey players (age 18 and under) and pushers are allowed.

Location and date: Thunder Ice Arena, 619 W Maumee St, Angola, IN 46703
February 1-2, 2020. The event will start Saturday morning and conclude by mid-afternoon Sunday.

Competition format: All teams are guaranteed three games. We are limiting the tournament to the first eight teams that provide **payment and roster**.

Registration fee: The early registration fee is \$410 per team. After January 17th the registration fee will be \$460. Registrations will be closed on January 24th. The fee is not refundable.

Lodging: Group Code: **Turnstone Sled Hockey**. All rates include Breakfast. Please call before deadline. You can find other options without penalties.

Deadline: Please complete and submit all registration forms along with a JPEG color Team Logo (if you have one) by **January 17th, 2020**.

Registration forms: Team Registration Form, Team roster, Turnstone Player Waiver and Consent of Photo Release.

Please mail check to the address below. Make checks payable to: Turnstone.

Turnstone
3320 North Clinton St.
Fort Wayne, IN 46805
Attention: Sports and Recreation- Jaime Garzon

Hotel information- Quotes are subject to hotel availability. Group Code: Turnstone Sled Hockey. All rates include Breakfast. Please call before deadline. You can find other options without penalties.

Hotel	Address	Phone	Rate	Deadline
Quality Inn	271 West State Road 120, Fremont, IN, 46737	(260) 495-9770		
Ramada	3855 IN-127, Angola, IN 46703	(260) 665-9471		
Holiday Inn	6245 Old U.S. 27, Fremont, IN 46737	(260) 833-6464	\$91	12/31/2019
Comfort inn	251 West State Road 120, Fremont, IN 46737	(260) 495-7131	\$85	12/31/2019

If you have any questions please contact Jaime Garzon at Jaime@turnstone.org or 260-969-7677



**Team Registration Form
10th Annual Silver Stick Sled Hockey Finals**

**This form must be submitted electronically, and needs to be typed, not hand-written
List athletes chronologically by uniform number – lowest to highest**

TEAM NAME: _____

TEAM CONTACT PERSON: _____

HEAD COACH: _____ ASST. COACH: _____

TEAM MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP Code: _____

PHONE (WK): _____ - _____ (Cell): _____ - _____

E-MAIL: _____

PARALYMPIC SPORT CLUB AFFILIATION: _____

TEAM ASSOCIATION (i/e Rocky Mt, Mid-AM, Southeastern, MAHA, AAHA, etc.): _____

GAME/TOURNAMENT RECORD (IF ANY)

Tournament	Division	Results (wins/loses)

Team application form, payment, team roster form and official hockey roster are required prior to acceptance in tournament. Incomplete registration forms may cause a delay and or the possibility of not being accepted into the tournament. All players must be under 18 years of age by December 31, 2019 (unless an age waiver is granted). **Able-bodied players are NOT allowed.** Mail or e-mail to Jaime Garzon at Turnstone, jaime@turnstone.org

Team Official Signature: _____ Contact phone: _____



Team Roster

Team Name: _____

	Last Name	First Name	Jersey #	Date of Birth	USA Hockey #	Disability
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
					Phone Number	Email
	Head Coach					
	Assistant Coach					
	Assistant Coach					
	Team Contact					



WAIVER, RELEASE OF LIABILITY, AND CONSENT TO MEDICAL ATTENTION

In exchange for my being allowed to participate in the Turnstone Center for Children and Adults with Disabilities, Inc. Sports and Recreation Program ("program"), I, and if I am not yet 18 years old, my parent or legal guardian, agree to be bound by each of the following:

1. **Identification of Risks.** I understand that participation in the program may involve risk of injury, disability, or death.
2. **Assumption of Risks.** I assume all risks connected with my participation in the program. I accept personal responsibility for any liability, injury, loss or damage in any way connected with my participation in the program.
3. **Waiver and Release.** I release and discharge Turnstone Center for Children and Adults with Disabilities, Inc. and each of their affiliated organizations, directors, officers, sponsors, employees, agents, successors, and assigns from all claims for any liability, injury, loss, or damage in any way connected with my participation in the program. I intend for this waiver and release to also apply to my relatives, personal representatives, heirs, beneficiaries, next of kin, and assigns who might pursue any legal action or claim for such liability, injury, loss or damage. I further understand that I am responsible for obtaining medical insurance as well as assuming responsibility for any medical expenses resulting from participation in the program.
4. **See reverse for Photo Release**

I HAVE READ THIS WAIVER, RELEASE, AND CONSENT AND UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS CONTAINED HEREIN. I AM SIGNING THIS WAIVER, RELEASE, AND CONSENT VOLUNTARILY.

Team _____

Signature _____

Date: _____

Printed Name _____

IF THE PERSON PARTICIPATING IN THE PROGRAM IS NOT YET 18 YEARS:

As a parent or legal guardian of the above named child, I verify that I fully agree to, understand, and accept all provisions of this Waiver, Release, and Consent.

Signature _____

Date: _____

Printed Name _____



**CONSENT FOR RELEASE OF
PHOTOGRAPH, VIDEO & AUDIO RECORDING ONLY**

PHOTO RELEASE / CONSENT ONLY

I, the undersigned, hereby consent and give permission to Turnstone Center for Children and Adults with Disabilities, Inc. ("Turnstone"), to take still photographs, video / film recording and audio-recording of _____ (Client Name) / _____ (Date).

In addition, I hereby consent and give permission to Turnstone to use and/or disclose such still photographs, video/film recordings and audio recordings for publication in newspapers, trade journals and other publications as well as broadcast via radio or television. This release is good for one year from the date signed.

I understand that:

- This consent permits Turnstone to use and disclose still photographs, video/film recordings and audio recordings of me for publication in newspapers, brochures, social media, website and other media; outside of my first name, no additional information will be shared in conjunction with my image or recording.
- I may refuse to sign this authorization and that it is strictly voluntary.
- My treatment, payment, provision of service may not be conditioned on signing this authorization
- I may revoke this authorization at any time in writing, but if I do, it will not have any effect on any actions taken prior to receiving the revocation. (Further details are in Notice of Privacy Practices)
- I will be provided a copy of this signed form upon request.
- Turnstone will not compensate me financially or with in-kind compensation in exchange for using or disclosing my image.

_____ Yes, but please do not include pictures on _____ (social media, website, etc.)

_____ No, pictures cannot be taken.

I have read the above and authorize the use and disclosure of my image as stated.

Signature

Date

Copy to Marketing/Communications Specialist