



Blyth Brussels Minor Hockey U6 Jamboree
Sanction #

When: Saturday, February 19th, 2022

Location: Brussels Morris Grey Arena – Brussels, ON

Time: 8:30am-1:30pm

Cost: \$325 per team

The Blyth Brussels Minor Hockey Association invites your team to participate in the 2022 U6 Jamboree:

- This Jamboree is for U6 Local League teams.
- Entry fee for the Jamboree is \$325 per team
- Each team will play 3 games, each player will receive a medal/trophy and lunch will be provided to players and bench staff with their registration fee
- Meal will be available for purchase for parents, siblings, spectators
- Teams will be registered in the Jamboree **In Order of Payment Received Up Until 8 Teams have been Registered**
- Any Inquiries are to be directed to mcgillis87@gmail.com
- Rules in Accordance with OMHA in effect.

Cheques made payable to **Blyth Brussels Minor Hockey** or by e-transfer to cbellamy@alumni.uoguelph.ca

Mail cheques and registration forms to:

Caitlin Gillis

83489 Gillis Line

Brussels, ON. NOG 1H0

Or email registration form to mcgillis87@gmail.com and e-transfer to cbellamy@alumni.uoguelph.ca. Please put team name in notes of e-transfer.

Please fill out below registration forms and send in with cheque or e-transfer to register your team. A confirmation email will be sent once your team has registered and paid fee.



Blyth Brussels Minor Hockey Association

U6 Jamboree
Registration Form

Center: _____

OMHA Classification: _____

Team Name: _____

Sweater Colour: 1. _____ 2. _____



PLEASE PRINT PLAYERS NAME ON LEFT COLUMNS. PLEASE PROVIDE #'S FOR BOTH HOME AND AWAY SWEATERS. THESE ARE USED TO HELP IN PRESENTING AWARDS AND MEDALS DURING TOURNAMENT.

PLAYER'S NAME	HOME JERSEY # AND COLOUR	AWAY JERSEY # AND COLOUR

TEAM STAFF:

POSITION	NAME (PLEASE PRINT)
HEAD COACH	
ASSISTANT COACH	
ASSISTANT COACH	
TRAINER	
ASSISTANT TRAINER	
MANAGER	
PARENT REP	



IN ORDER TO AVOID ANY CONFUSION OR MISCOMMUNICATION, WE REQUEST THAT YOU PLEASE FILL OUT ALL OF THE INFORMATION BELOW FOR CONTACT PURPOSES.
THANK YOU!

TEAM CONTACT INFORMATION

TEAM NAME: _____

TOWN: _____

CONTACT NAME (POSITION): _____

PHONE: _____

EMAIL: _____

ALTERNATE CONTACT NAME (POSITION): _____

PHONE: _____

EMAIL: _____

CHEQUE NUMBER: _____

OR

E-TRANSFER EMAIL: _____