



**12th Annual USA Broomball 2010
National Championships
March 26 - 28, 2010
Schwan's Super Rink
Blaine, MN**



<p>Entry Fee \$380.00 (No individual player fees)</p> <p>Structure Pool Play/Championship Bracket Three Game Guarantee Men's Classes A, B, C/D Co-Rec, Co-Rec Collegiate, Men's Collegiate</p> <p>Entry Deadline Friday, February 26, 2010</p> <p>To avoid exclusion, enter early</p> <p>Eligibility Players must reside in USA. Foreign players are not eligible. Players must be 18 years of age or older on or before March 26, 2010. Minnesota teams must have competed in state tournament play.</p> <p>Roster Limit 17 players – deadline to submit is at team check-in at tournament site.</p> <p>Game Officials Two USA Broomball game officials will be employed on all contests.</p>	<p>Playing Rules All play shall be governed by the 2010 USA Broomball Rules. Checking is allowed in Men's A only. If a player is playing in two divisions (i.e., Men's and Co-rec), we cannot guarantee that game times will not conflict. All teams must be prepared to play Friday at 8 am; teams from the Twin Cities must be prepared to play Thursday evening. Class A and B men's teams must wear matching, numbered jerseys. Contact USA Broomball if there are any questions to this rule.</p> <p>Game Balls Official game ball shall be the orange D-Gel version</p> <p>Helmets Commercially produced hockey helmets are required.</p> <p>Awards Team trophies will be presented to the first, second and third place teams. Championship team banner will be presented to the first place team.</p>
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2010 National Championships Entry Form

Team Name _____ Sports Community _____
 Team Manager _____ Phone H (____) _____ W (____) _____
 Address _____ City & State _____ Zip _____
 Email Address _____

Co-Rec Division (Circle Class): Open (A/B) _____ Recreational (C/D) _____

Men's Division (Circle Class): A _____ B _____ C/D (Recreational) _____

Collegiate (Circle Class): Men's _____

I hereby certify that the players on our team roster reside in the USA.

Manager's Signature _____ Date _____

Send check/money order or credit card information

for \$380.00 and entry form/roster to:

MSF – USA Broomball
 PO Box 20201
 Bloomington, MN 55420
 (612) 201-6088
 Fax: (763) 263-5657
 tournaments@usabroomball.com

Visa ____ MasterCard ____ Credit Card Number (16 digits) _____ _____ Expiration Date _____ (month/year) (Cannot be processed without expiration date) Name as it appears on card _____ Signature _____
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