

HIGH CALIBRE HOCKEY 4 ON 4 - KNIGHTS CUP SPRING HOCKEY TOURNAMENT

LOCATION: SPORTS CENTER 1 AND 2, COURTENAY, BC

DATES: MARCH 18TH TO 24TH 2024 TIMES: SEE ATTACHED SCHEDULE

COST: \$225.00 PLUS GST (\$236.00) PER PLAYER

STRUCTURE: 6 TEAMS WILL CONSIST OF 8 PLAYERS AND 1 GOALIE

AGES: 2014 AND 2015 BIRTHDATES

HIGH CALIBRE HOCKEY IS HOSTING A 4 ON 4 SPRING TOURNAMENT — THE KNIGHTS CUP. PLAYERS WILL BE PLACED ON A TEAM AND PLAY IN A TOURNAMENT WITH A ROUND ROBIN AND PLAYOFF FORMAT. PLAYERS WILL BE SELECTED TO TEAMS ACCORDING TO THEIR SKILL LEVELS TO ENSURE ALL TEAMS ARE BALANCED AND COMPETITIVE TO HELP CREATE AN ENJOYABLE AND CHALLENGING ENVIRONMENT FOR ALL PLAYERS. GAMES WILL BE 40 MINUTES WITH TOP PLAYERS OF THE GAME FOR EACH GAME RECEIVING AN AWARD. WINNER OF THE 4 ON 4 KNIGHTS CUP WILL BE PRESENTED WITH A TROPHY. 6 GAMES GUARANTEED. GAMES WILL BE HIGH PACED WITH PLAYERS ON THE ICE EVERY OTHER SHIFT. ONE MINUTE AND THIRTY SECOND SHIFTS.

SCHEDULE:

- 1. MONDAY MARCH 18TH 4:30-5:15PM 1 VS 2 SC1
- 2. MONDAY MARCH 18TH 5:30-6:15PM 3 VS 6 SC1
- 3. TUESDAY MARCH 19TH 8:15-9:00AM 4 VS 5 SC1
- 4. TUESDAY MARCH 19TH 6:15-7:00PM 6 VS 1 SC2
- 5. TUESDAY MARCH 19TH 7:15-8:00PM 3 VS 4 SC2
- 6. WEDNES. MARCH $20^{TH} 3:45-4:45PM$ 2 VS 5 SC1
- 7. WEDNES. MARCH $20^{TH} 4:45-5:30PM$ 6 VS 4 SC1
- 8. WEDNES. MARCH 20TH 5:45-6:30PM 2 VS 3 SC1
- 9. THURS. MARCH 21ST 8:15-9:00AM 1 VS 5 SC2
- 10. THURS. MARCH 21ST 9:15-10:00AM 6 VS 2 SC2
- 11. THURS. MARCH 21ST 5:15-6:00PM 5 VS 3 SC2
- 12. FRIDAY MARCH 22ND 8:30-9:15AM 4 VS 1 SC2
- 13. FRIDAY MARCH 22ND 9:30-10:15AM 5 VS 6 SC2
- 14. FRIDAY MARCH 22ND 4:15-5:15PM 4 VS 2 SC1
- 15. SATURD. MARCH 23RD 9:15-10:00AM 1 VS 3 SC2
- 16. SUNDAY MARCH 24TH 9:15-10:00AM #3 VS #4 SC1
- 17. SUNDAY MARCH 24TH— 10:15-11:00AM #4 VS #5 SC1
- 18. SUNDAY MARCH 24TH 12:15-1:00P #1 VS WINNER GAME 16 SC1
- 19. SUNDAY MARCH 24TH 1:15-2:00PM #2 VS WINNER GAME 17 SC1
- 20. SUNDAY MARCH 24TH 3:15-4:15PM KNIGHTS CUP FINAL-SC1

REGISTRATION: 4 ON 4 SPRING TOURNAMENT – 2024 KNIGHTS CUP

NAME:

CURRENT TEAM:

BIRTHDATE:

PREFERRED POSITION:

SHOT: L/R

EMERGENCY CONTACT:

ALLERGIES:

PLEASE SEND THE REGISTRATION INFORMATION TO:

HIGHCALIBREHOCKEY@GMAIL.COM

PAYMENT WILL CONFIRM YOUR SPOT IN THE 4 ON 4 TOURNAMENT ETRANSFER TO: HIGHCALIBREHOCKEY@GMAIL.COM