

**3rd ANNUAL JUNE HILL MEMORIAL
ONTARIO 1-WALL HANDBALL
TOURNAMENT
SATURDAY, JUNE 1ST, 2013
(Rain Date: Sunday, June 2nd, 2013)**

hosted by the:



- Location** : Brant Hills Public School, 2330 Duncaster Dr, Burlington, ON, L7P4S6
(4-outdoor courts located 5-minutes from the Cedar Springs Health Club)
- Entry** : Completed entry form must be received by **May 27th, 2013**
: Entry fee of \$20 per Adult Player payable at the event. Juniors are free.
- Registration** : 9-9:30AM, play to start promptly at 10AM
: Signed entry (Parents signature if under 18-years-of-age) required to play
: Eye protection is mandatory, and will be provided if necessary
- Format** : The intent of the day is to maximize the kids playing time, while teaching them the fundamentals of the game. Handball is fun!!!
: Big Ball, 31-Point Games, "Rally-Point" Scoring, 2-games guaranteed
: Junior Singles Divisions to be determined on the number of entries
: Junior/Senior Doubles Divisions tbd on number of entries
- Amenities** : Tournament shirt, awards, and light food/beverage during the day
: Clinic/Feature Match by current & past OHA/USHA/Canadian Champions
: Absolutely no alcoholic beverages or smoking allowed on the premises
: Be sure to bring sunscreen, outdoor running shoes and your killshot
- Tournament Committee** : Wally Oprzedek (905) 980-1012 (Boys/Adult Divisions Convenor)
: Jenine Wilson (905) 995-4581 (Girls Divisions Convenor)

Liability and Media Waiver

I, _____, the parent/legal guardian of the minor, _____ (the "Participant"), hereby acknowledge that the Participant and I agree to waive any and all financial and legal claims against the **Ontario Handball Association**, its related organizations, officers, directors, agents, representatives, and employees (the "Organizers") for any injury, harm and/or damage suffered by the Participant during the course of his/her attendance at the **2013 Ontario 1-Wall Handball Tournament**. The Participant and I also agree not to hold the Organizers liable for any negligence caused in whole or in part by the Organizers throughout the entire duration of the **2013 Ontario 1-Wall Handball Tournament**. The Participant and I will also waive all claims for injuries or financial claims against the Organizers related to the actions taken by a third party which may result in damages against the Participant. I acknowledge that Organizers are not liable for loss of the property of any participant throughout the entire duration of the **2013 Ontario 1-Wall Handball Tournament**.

I consent to having the Participant filmed, interviewed, or have audio or video recordings made of the Participant by the media (print, broadcast and on-line) and the Organizers during the **2013 Ontario 1-Wall Handball Tournament**. I understand that the text or image(s) may appear in electronic form on the internet or in publications outside of the **Ontario Handball Association's** control.

I agree that the Participant and I will not hold the Organizers responsible for any harm that may arise from such unauthorized reproduction.

Date Last name/First name (printed) _____
Signature of parent

Date Last name/First name (printed) _____
Signature of participant

Player and Contact Information

E-Mail address: _____

Home City: _____

Phone number: _____ (home) _____ (cell)

Junior Divisions: Boy Girl (Circle One) Age: _____

Pro Rookie (Circle One)

Senior Divisions: Pro Rookie (Circle One)

Doubles Partner: _____

How long playing 1-wall handball? _____ Comments: _____

Please complete this form and forward. Must be received by May 27th, 2013:

- Scan and e-mail to: iamwallyo@gmail.com
- Mail to: 25 Sheridan Drive, St. Catharines, ON, L2M 6N8