



**20th Annual USA Broomball 2018
National Championships
April 13-15, 2018
Schwan's Super Rink • Blaine, MN**

Entry Fee

\$450.00 if entry received before January 1, 2018.

\$500.00 if entry received after January 1, 2018.

Structure

Pool Play/Championship Bracket

Three Game Guarantee

Men's Classes A/B, C/D, Co-Rec, Women's

Class structure subject to change based on ice availability, team reclassification and number of teams. Divisions for Co-rec and Women's will be determined after pool play.

Tournament director reserves the right to change the format depending on number of registrations.

Entry Deadline

Friday, February 9, 2018

To avoid exclusion, enter early

Eligibility

Players must reside in USA. Foreign players are not eligible.

Players must be 18 years of age or older on or before April 13, 2018. Minnesota teams must have competed in state tournament play.

Roster Limit

20 players – deadline to submit is at team check-in at tournament site.

Playing Rules

All play shall be governed by the 2018 USA

Broomball Rules. No checking in any divisions of play.

If a player is playing in two divisions (i.e., Men's and Co-rec), we cannot guarantee that game times will not conflict. USA Broomball reserves the right to reclassify any team at any time, as well as modify the tournament structure. All teams must be prepared to play Friday at 8:00am through Sunday at 4:00pm; Class A/B men's teams must wear *matching*, numbered jerseys.

Game Balls

Official game ball shall be the orange D-Gel version.

Helmets

Commercially produced hockey helmets and broomball shoes are required.

Awards

Team trophies will be presented to the first and second place teams. Championship team banner will be presented to the first place team.

Game Officials

Two USA Broomball game officials will be employed for all contests.

Please direct tournament questions to webmaster@usabroomball.com.

2018 National Championships Entry Form

Team Name _____ Sports Community _____

Team Manager _____ Phone (H) _____ (C/W) _____

Address _____ City & State _____ Zip _____

Email Address _____

Check or X the Division:

Co-Rec Division: [] **Women's Division:** []

Men's Division: A/B [] C/D (Recreational) []

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

Manager's Signature _____ Date _____

Payment information: (please check one)

Visa [] MasterCard [] Check/Money Order [] (please make payable to MSF-USA Broomball)

Credit Card Number (16 digits) _____

Expiration Date _____ / _____ (month/year - Cannot be processed without expiration date)

Name as it appears on card _____ Signature _____

Mail payment & entry form to: MSF – USA Broomball, P.O. Box 20201, Bloomington, MN 55420