

First Name

Last Name

Address

City

State/ Zip

Cell Number

Email

Team name or put individual

**Please Circle Yr and Position**

1993 1994 1995 1996

1997 1998 1999

2000 2001 2002

**Position**

Forward/Defense

Goalie



4 on 4  
Open Hockey  
Tournaments  
2011

May 28/29<sup>th</sup>  
June 4/5<sup>th</sup>  
Aug 6/7<sup>th</sup>

1993 thru 2002

Colorado Sports  
Center



16240 Old Denver Hwy  
Monument, CO 80132  
(719) 487-8572

## Dates:

Sessions:

May 28/29<sup>th</sup>

June 4/5<sup>th</sup>

Aug 6/7<sup>th</sup>

8am – 6pm

## Format:

- Two 15 min periods
- 3 game guarantee
- Playoffs
- Prizes
- Rules:
  - Zero tolerance
  - Fun event
  - No fighting

## Teams:

You can organize your own teams or we will place you one a team.



## For Information:

Ed Saxer

[hockeydirector@coloradohockeyclub.com](mailto:hockeydirector@coloradohockeyclub.com)

[coloradohockeyclub.com](http://coloradohockeyclub.com)

## Cost:

❖ \$45 per session

## How to Register:

❖ Fill out registration, per player

❖ Make check payable to:  
**Colorado Hockey Club**

❖ Mail Registration/Check to:

**Ed Saxer**  
210 Holbrook St,  
Colorado Springs, CO 80921