

# Tournament Details

- Cost: \$400.00 per team
- 4 Game Guarantee
- 6 Skaters maximum
- One Goalie Required
- All games played on 1/2 ice
- (2) Twelve Minute Periods  
- Running Clock
- 1 Minute warm-up
- 1 Minute between periods
- NO Checking at any level
- 6 Teams / Division
- No overnight stay / Hotel required
- All participants must have a valid USA Hockey #
- All teams must provide a USAH certified roster and coach
- All players receive a TMF jersey!

Mark  
Data

Tryouts for the 2018-19  
Miami Youth Hockey  
travel teams will be held  
Saturday - Sunday  
April 21 - 22, 2018



**3 V 3**  
**Tournament**  
**March 17-18, 2018**

The Metcalf Cup is a memorial tournament held in honor of Taylor Metcalf, who was killed in a car accident in 1995. Taylor loved playing hockey and the Metcalf Cup provides support for underprivileged kids to participate in youth hockey. All proceeds from the tournament go to the Metcalf Fund. We are grateful for your support and will do everything to make this a good experience for you and your families.



*Tournament proceeds benefit the Taylor Metcalf Fund supporting hockey players in Oxford and surrounding areas.*

**DIVISIONS**  
**14U Bantam**  
**12U PeeWee**  
**10U Squirt**

**M** MIAMI UNIVERSITY  
GOGGIN ICE CENTER

## 14U / 12U Divisions

Saturday, March 17  
2:00 - 9:00 p.m.

## 12U / 10U Divisions

Sunday, March 18  
7:00 a.m. - 3:00 p.m.

\* Schedule to be determined by number of teams per division and level of play during '17-'18 season.

### Tournament Contacts

Beth Frey  
neumanba@miamioh.edu  
(513) 839-0674

Mike Norton  
nortonm2@miamioh.edu  
(574) 780-6789

### Location

Miami University  
Goggin Ice Center  
610 South Oak Street  
Oxford, Ohio 45056  
(513) 529-9800  
MiamiOH.edu/ICE

Return completed form with **Registration Fee** to:  
Taylor Metcalf Fund c/o Beth Frey, 4018 Stahlheber Rd., Hamilton, Ohio 45013

\_\_\_\_\_  10U Squirt     12U PeeWee     14U Bantam  
**TEAM NAME** **DIVISION**

| SKATER INFORMATION: | USA Hockey # | 2017-18 Level of Play |
|---------------------|--------------|-----------------------|
| 1. _____            |              |                       |
| 2. _____            |              |                       |
| 3. _____            |              |                       |
| 4. _____            |              |                       |
| 5. _____            |              |                       |
| 6. _____            |              |                       |
| Goalie _____        |              |                       |

### **COACH INFORMATION:**

\_\_\_\_\_  
Coach Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
E-Mail

\_\_\_\_\_  
Contact Address

Registration Closed March 1, 2018  
\$400 Per Team - Checks Payable to: Taylor Metcalf Fund  
Each team will receive Taylor Metcalf Fund Jerseys!!

**Office Use Only:**    **Date** \_\_\_\_\_    **Pmt Type** \_\_\_\_\_    **Amount** \_\_\_\_\_