OMHA MODIFIED ICE

Participant List

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Modified-Game #: |  | Date: |  | Time: |  | Location: |  |
| Team Name: |  |  | Team Name: |  |

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| --- | --- | --- | --- | --- |
| **Jersey #** | **Player Name (Please Print)** |  | **Jersey #** | **Player Name (Please Print)** |
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| **Bench Staff** | **Name (Please Print)** |  | **Bench Staff** | **Name (Please Print)** |
| Coach |  |  | Coach |  |
| Trainer |  |  | Trainer |  |
| Manager |  |  | Manager |  |
| Asst. Coach/Trainer |  |  | Asst. Coach/Trainer |  |
| Asst. Coach/Trainer |  |  | Asst. Coach/Trainer |  |

* The Game Participant List must be completed prior to the start of each modified-game.
* Only those players and bench staff on the team’s approved roster are eligible to participate.

|  |  |  |  |
| --- | --- | --- | --- |
| **Referee Name (Please Print)** |  | **HCOP#** |  |
| **Referee Name (Please Print)** |  | **HCOP#** |  |
| **Referee Notes:** |
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| --- |
| **Forward Completed Copies to: Glenn Silver, Regional Director region 1 B****Glenn.Silver@OMHA.net** |
|  |

 OMHA-REG-251018-V1