



DODGE. DUCK. DIP. DIVE. DONATE

Presented by



We would like to enter a dodgeball team for the Lloydminster Region Health Foundation's; **Lloydminster's Gift to Health Livestream** on December 3rd, 2024. (Teams must consist of a minimum of 6 players and up to 15. Maximum 10 players may be on the bench each game. Teams must have 3 male & 3 female players on the court at all times) Registration fee is \$500/10 player team. Each addition player pays \$50 each up to a maximum of 15 players. Must be 18 to participate. All games will be played at the Hoop Factory. **PLEASE NOTE: **WE ARE ONLY ABLE TO ACCOMMODATE THE FIRST 16 TEAMS THAT HAVE THEIR COMPLETED REGISTRATION FORMS AND PAYMENT INTO US.** Remaining entries will be placed on a waiting list.

Team Name: _____

1. Player Name (Team Captain): _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

2. Player Name: _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

3. Player Name: _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

4. Player Name: _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

5. Player Name: _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

6. Player Name: _____

Address: _____

Phone number: _____ Email: _____

HCN: _____ Emergency contact: _____ Phone # _____

7. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
8. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
9. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
10. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
11. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
12. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
13. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
14. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____
15. Player Name: _____
Address: _____
Phone number: _____ Email: _____
HCN: _____ Emergency contact: _____ Phone # _____

Prizes will be awarded in the following categories:

- Best costume
- Overall winner of tournament

Please read all rules of play prior to game day. Regular correspondence will be sent out with updates surrounding the event, so please ensure you have provided an updated email. Teams are also encouraged to raise pledges, this can be done online at www.lrhf.ca or www.justgiving.com.

Team Captain will be the main contact for the LRHF.

Thank you for your commitment in helping us “Dodge for a Cause”! Alone we can do so little; together we can do so much!

**Non-charitable tax receipt will be issued

Registration Fee: \$500/10 player team; \$50 for each addition player up to a maximum of 15 players.

Please pay via cheque or cash by dropping it off at the LRHF Office at 4910 50th Street – Suite #116 (located in the Prairie North Plaza)

Or Pay via Credit Card by filling out the information below.

REGISTRATION PAYMENT:

- Credit Card (provide details below)
- Visa Mastercard American Express

NAME ON CARD _____

CARD # _____ **EXPIRY** _____ **CVV** _____