## **OMHA - MODIFIED ICE**

Participant List



 Modified-Game #:
 Date:
 Time:
 Location:

Team Name:		Team Name:	
Jersey #	Player Name	Jersey #	Player Name
Bench Staff	Name	Bench Staff	Name

Bench Staff	Name	Bench Staff	Name
Coach		Coach	
Trainer		Trainer	
Manager		Manager	
Asst. Coach/Trainer		Asst. Coach/Trainer	
Asst. Coach/Trainer		Asst. Coach/Trainer	
Referee Name		HCOP#	

• 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 Notes:

Forward Completed Copies to: GWEN.FICKLING@OMHA.NET and CC: your LMLL Centre Rep