



# PACIFIC COAST AMATEUR HOCKEY ASSOCIATION

CENTRAL OFFICE: #114 - 3993 HENNING DRIVE, BURNABY, B.C. V5C 6P7  
TELEPHONE 604-205-9011. FAX 604-205-9016. WEB SITE <http://www.pcaha.bc.ca>

SERVING AMATEUR HOCKEY IN THE LOWER MAINLAND SINCE 1941

## **BULLETIN**

**DATE:** December 19, 2006.  
**FROM:** Antony Pagan  
Chair, PCAHA Special Events Committee  
**TO:** All Coaches and Managers  
PCAHA Juvenile Division  
**SUBJECT:** **2006 PCAHA Scotiabank Juvenile Scholarship Tournament.**

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The PCAHA Scotiabank Juvenile Scholarship Tournament is the annual showcase event for the Juvenile division. It is held to promote participation in Minor Hockey at the Juvenile level by showcasing those Juvenile Division players exhibiting the qualities of good sportsmanship, leadership, character, and playing ability. In addition, the Tournament aims to increase participation by Juvenile players in the PCAHA Scholarship Program.

This year's Tournament, the 24th Annual, will be held **January 29-February 4, 2006**. Your assistance is needed to nominate the players who will participate for the three Tournament teams. Player eligibility guidelines are as follows:

1. Players must be registered in the Juvenile Division with a PCAHA-member Association.
2. First preference will be given to graduating Juvenile players (20 years old as of December 31st of the current season).
3. If there are insufficient eligible 20 year olds on a given club team, second preference will be given to 19 year olds.
4. Any player having incurred a Match Penalty or Gross Misconduct during the current season is ineligible for participation in the Tournament. In addition, players may be disqualified for excessive penalty minutes upon review of their penalty record.

Each Juvenile team is responsible for nominating **two (2) players plus two (2) alternates** (not including goalkeepers) to participate in the tournament. Please find enclosed a copy of the Tournament nomination form along with relevant excerpts from the Tournament Operating Guidelines. Please review the section on player eligibility and selection before you complete the form with your team's nominations. When selecting your team's representatives, please take into account the qualities of good sportsmanship, leadership, character, and playing ability. Please also submit a head-and-shoulder **photograph** for each nominated player (e.g., high school annual photo) when you submit your nominations.

Goalkeepers are selected separately. Please refer to the enclosed goalkeeper nomination form. In addition, if you are interested in acting as a Coach or Manager of one of the tournaments teams, please complete the attached team official application form and forward it to Dave Wallace.

Your completed nomination forms (including player photos) should be submitted to: **Dave Wallace, Managing Director, Juvenile Division; 9878 - 180A Street, Surrey, B.C., V4N 4V5 (phone: 604-583-7026, fax: 604-583-6018; e-mail: [dwallace@pcaha.bc.ca](mailto:dwallace@pcaha.bc.ca)).** Nominations are due on or before **Wednesday, January 4, 2006.**

Thank you for your assistance in making this year's event a success.



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## **P.C.A.H.A. SCOTIABANK JUVENILE SCHOLARSHIP TOURNAMENT** **2005-2006 OPERATIONAL GUIDELINES**

### **EXCERPTS**

#### **A. General:**

1. **Objective:** The PCAHA annually hosts the Juvenile Scholarship Tournament to promote participation in Minor Hockey at the Juvenile level (age 18-20) by showcasing those Juvenile Division players exhibiting the qualities of good sportsmanship, leadership, character, and playing ability. In addition, the Tournament aims to increase participation by Juvenile players in the PCAHA Scholarship Program.
2. **History:** The Juvenile Scholarship Tournament was established in 1983 by Earle Sinkie and Ed Hanusiak (then PCAHA Juvenile Division Managers) to provide a recognition event for graduating Juvenile players.

#### **E. Player Eligibility and Selection:**

##### 1. **Basic Qualifications:**

- (a) Players must be registered in the Juvenile Division with a PCAHA-member Minor Hockey Association.
- (b) Each member Minor Hockey Association entering a Juvenile "A" team shall have as close to equal representation as possible on the Tournament team representing its Conference or grouping.
- (c) First preference shall be given to graduating Juvenile players (20 years old as of December 31st of the current season). If there are insufficient eligible 20 year olds on a given club team, second preference shall be given to 19 year olds (19 years old as of December 31st of the current season).
- (d) Sportsmanship Requirement - Any player having incurred a Match Penalty or Gross Misconduct during the current season shall be ineligible for participation in the Tournament. In addition, players may be disqualified for excessive penalty minutes upon review of their penalty record.

##### 2. **Player Nomination Process:**

- (a) The Committee shall allocate club teams to each Scholarship Tournament team for purpose of distributing the eligible players.
- (b) Each club team is responsible for nominating a number of players from among the eligible players on that team (excluding goalkeepers). The number of players nominated will be approximately equal for all club teams.
- (c) Player nominations from club teams shall be based upon the qualities of good sportsmanship, leadership, character, and playing ability.
- (d) Upon nomination, each player must turn in a photograph for program.

##### 3. **Player Selection Process:**

- (a) There shall be no tryouts. Eligible nominated players shall be assigned to the Tournament team rosters by the Coordinator.
- (b) The size of the final roster for each Tournament team shall be 17 skaters plus 2 goalkeepers.
- (c) Goalkeepers will be selected by the Managing Director and League Manager(s). Goalkeeper selection shall include the opportunity of input from Juvenile Division team officials by way of

- a "Goalkeeper Nomination Form".
- (d) A designated standby goalkeeper may be designated for use in case of the unavailability of the regular, selected goalkeepers.
- (e) Each Tournament team shall be permitted a maximum of four practice icetimes (outside of the Tournament games), as supplied by the participating club teams. All nominated players shall be invited to all practices of their Tournament team.
- (g) Coaching staffs must inform the Tournament Committee of the times, dates, and locations of all practices.
- (h) Coaching staffs must maintain a record of player attendance at all practices and submit this record to the Tournament Committee.
- (i) There shall be no substitution of players with the exception of goalkeepers. If a goaltender is rendered unavailable by reason of injury or suspension, the Tournament Committee shall authorize use of the designated standby goalkeeper.
- (j) A player participation fee shall be charged all players toward attendance by the player at the award ceremonies or windup.

**F. Tournament Format:**

1. **Dates:** The Tournament will be held following B.C. Minor Hockey Week but prior to the start of the Juvenile "AAA" playoffs.
2. **General Format:** The Tournament shall be a three team single-round-robin series with a championship final game. (Total=4 games).
3. **Participating Teams:** Three representative (3) teams shall be drawn from among the PCAHA member Minor Hockey Associations entering Juvenile teams.
4. **Game Format:**
  - (a) Pre-game warm-up - 10 minutes.
  - (b) Periods will be three 20-minute stop time periods.
  - (c) There will be an ice clean prior to the game and between periods.



**Scotiabank**



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## **2006 PCAHA SCOTIABANK JUVENILE SCHOLARSHIP TOURNAMENT** **PLAYER NOMINATION FORM**

**ASSOCIATION/TEAM:** \_\_\_\_\_

**1.**

Player's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Regular Position: Defence: \_\_\_\_ Forward: \_\_\_\_ Regular Sweater Number: \_\_\_\_  
Playing Ability (rank 1-5): \_\_\_\_\_ (1=weak, 5=strong)

*N.B.: Enclose Photograph for Tournament Program*

**2.**

Player's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Regular Position: Defence: \_\_\_\_ Forward: \_\_\_\_ Regular Sweater Number: \_\_\_\_  
Playing Ability (rank 1-5): \_\_\_\_\_ (1=weak, 5=strong)

*N.B.: Enclose Photograph for Tournament Program*

**Alt.  
#1**

Player's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Regular Position: Defence: \_\_\_\_ Forward: \_\_\_\_ Regular Sweater Number: \_\_\_\_  
Playing Ability (rank 1-5): \_\_\_\_\_ (1=weak, 5=strong)

*N.B.: Enclose Photograph for Tournament Program*

**Alt.  
#2**

Player's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Regular Position: Defence: \_\_\_\_ Forward: \_\_\_\_ Regular Sweater Number: \_\_\_\_  
Playing Ability (rank 1-5): \_\_\_\_\_ (1=weak, 5=strong)

*N.B.: Enclose Photograph for Tournament Program*

**Team Official Completing Form:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Please complete and return to Dave Wallace by Wednesday, January 4, 2006.**



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## **2006 PCAHA SCOTIABANK JUVENILE SCHOLARSHIP TOURNAMENT** **GOALKEEPER NOMINATION FORM**

Goalkeepers for the PCAHA Juvenile Scholarship Tournament will be designated by the Managing Director and League Managers, rather than as part of the regular nomination process. The input of all Juvenile Division Coaches/Managers is requested and welcomed. Please complete this form with your recommendations and forward to **Dave Wallace by Wednesday, January 4, 2006.**

### **1. Outstanding Goalkeepers:**

In your opinion, from among the goalkeepers your team has played against this season, who are the outstanding goalkeepers in the Juvenile Division?

	<b><u>Goalkeeper's Name</u></b>	<b><u>Association</u></b>	<b><u>Comments</u></b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

### **2. Goalkeepers on Your Team:**

Do you recommend that one or both goalkeepers on your team be considered for selection for the Scholarship Tournament? Please only list goalkeepers who meet the Tournament eligibility criteria.

	<b><u>Goalkeeper's Name</u></b>	<b><u>Phone #</u></b>	<b><u>Playing Ability (rank 1-5)</u></b>	<b><u>Comments</u></b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

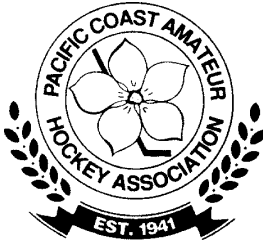
### **TEAM OFFICIAL COMPLETING THIS FORM:**

**Name:** \_\_\_\_\_

**Team:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Please complete and return to Dave Wallace by Wednesday, January 4, 2006.**



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## **2006 P.C.A.H.A. SCOTIABANK JUVENILE SCHOLARSHIP TOURNAMENT** **COACH/MANAGER APPLICATION FORM**

Applications are open for Coach, Manager, and Safety Official positions for the 2006 PCAHA Juvenile Scholarship Tournament. Six (6) Coaches and three (3) Managers will be appointed by the PCAHA Special Events Committee. Either one Safety Official for all 3 tournament teams or one Safety Official per team will also be appointed. If you are interested in applying for one of these positions, please complete this form and forward it to **Dave Wallace by Wednesday, January 4, 2006.**

Please note that any team official who has incurred a Game Misconduct, Gross Misconduct, or Match penalty during the current season is not eligible for selection.

### **1. Position Applying For:**

Coach

Manager

Safety Official

### **2. Personal Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **3. Hockey Experience:**

Season	Association	Division	Team	Position
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### **4. Certification/Qualification Held:**

Coach Level/Coach Stream: Year: \_\_\_\_\_

Safety Program (HSCP) Year: \_\_\_\_\_

Intermediate/Developmental 1: Year: \_\_\_\_\_

Speak Out Program Year: \_\_\_\_\_

Advanced Level: Year: \_\_\_\_\_

HC Initiation Program: Year: \_\_\_\_\_

Advanced 2 Level: Year: \_\_\_\_\_

Other: \_\_\_\_\_

### **5. Comments:**

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**Please complete and return to Dave Wallace by Wednesday, January 4, 2006.**