

CENTRAL REGION MIDDLE SCHOOL LEAGUE RULES

Games will be played in accordance with the Official Hockey Inline Playing Rules Book.

EXCEPTIONS TO THE GAME RULES

- 1. Three (3) minute warm-up before start of the game.**
- 2. Two (2) periods per game.**
- 3. Twenty (20) minute running clock per period.**
Except for the following:
 - a. Player injured on a play during the game.**
 - b. Stop clock the last two (2) minutes of the game if tied or two (2) goal difference.**
- 4. Two (2) minute break between periods.**
- 5. One (1) "Time Out" per game for each team.**
 - a. "Time Outs" are thirty (30) second in length.**
 - b. No "Time Outs" during the overtime periods.**
- 6. All minor penalties are two (2) minutes in length**
 - a. Clock will stop to put penalties up on the scoreboard**
- 7. All regular season games that end tie will stay as a tie.**
- 8. Playoff games that end a tie will play twenty minute sudden death periods until one team scores a goal.**
- 9. In a game if player receives his or hers third penalty. That player will receive an additional ten-minute penalty. If that same player receives a fourth penalty that players will be removed form that game only.**

Second offense of this rule by that player, he or she is subject to a next or one game suspension.

Third offense of this rule by the player is subject to a season suspension

10. Mercy Rule – Team that has ten (10) goal lead after the first period will be declared the winner.

11. Black or Red IDS pucks will be used for games.

12. Shooters will provide warm-up pucks.

13. Fighting – Any player who receives a major penalty for fighting will be subject to a three game suspension. The disciplinary board will review the referee's game report and if additional penalties are needed the board will impose them.

14. Protest – Any team filing a protest must file the protest within 48 hours after the game. A \$50 process fee will also need to be filed at the time of the protest. If the protest is upheld than the filing club will have the \$50 returned to the club. If the protest is declined than the \$50 will go into the general scholarship fund.

15. Helmet with face shield – All players must wear an approved helmet with full-face shield at all times during the game. This includes warm-ups and the hand shaking line after the game. Helmets with full face shield may be removed once player has left the playing surface.

16 Bench Area – Only rostered players, Head Coach and up to two Assistant Coach's are allowed on the bench during the game. Head Coach and Assistant Coach's must be listed on the official team roster.

CENTRAL VIRGINIA MIDDLE SCHOOL LEAGUE

WAIVER SHEET

PARTICIPANT NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____ CITY: _____ ST: _____

ZIP: _____

HOME PHONE: _____

E-MAIL ADDRESS: _____

WAIVER OF LIABILITY AND MEDICAL TREATMENT AUTHORIZATION

The undersigned understands that roller hockey is a rough and fast paced sport with a high risk for serious physical injury, including possible death, which risk is hereby voluntarily assumed. In consideration of the participants acceptance into this league, the undersigned does hereby release and forever discharge all entities/persons affiliated with this roller hockey tournament including, but not limited to, Shooter Indoor Sportplex , USA Roller Hockey, AAU, USA Inline Hockey, Richard Dudding, Richard Kent and any owners, officers, referees, advisors, coaches, assistants, volunteers and sponsors from any and all claims for damages or injuries which may be suffered by the participant now. The undersigned hereby agrees to indemnify and to hold the foregoing entities/persons harmless from such claims by or on behalf of the participant arising now or in the future. The undersigned hereby certifies that to the best of his or her knowledge and belief, the participant is in good physical condition and has no disease or injury that will be aggravated or cause harm to the participant or others in the league.

In case of emergency or injury, I hereby authorize Shooter Indoor Sportplex and/or its designated employees or agents to seek medical attention for the participant. All related costs will be paid by participant and/or guardian.

Signature of Participant: _____ Date: _____

Signature of Parent or Legal Guardian: _____ Date: _____

If participant is under 18