



USA HOCKEY

Tournament # 27CO56
COH1050

ROCKY MOUNTAIN DISTRICT INVITATIONAL TOURNAMENT APPLICATION

IMPORTANT: Please read USA Hockey Rules and Regulations, Article VIII "Games, Exhibition Games, Invitational Tournaments and Sanctioned Events" and any applicable Affiliate rules before completing this form. This sanctioned Invitational Tournament is expected to be conducted in compliance with local, state and federal health guidelines and regulations in force at the time and location of the tournament. All tournament promoters and/or organizers that are NOT USA Hockey-approved member programs, are required to provide proof of liability insurance evidencing \$1,000,000/occurrence and \$2,000,000/aggregate prior to an approved sanction being issued. Sanctioning of a tournament does not provide insurance for a non-member promoter and/or organizer. All tournament promoters and/or organizers agree that they are responsible for following and shall follow the USA Hockey Sanctioned Tournament Safe Sport Program Protocol, online at usahockey.com/resourcesanddownloads, in operation of the sanctioned tournament.

Tournament Title: 2026 All American Classic

Dates: 11.13.2026-11.15.2026 Sponsoring Organization: Foothills Hockey Association

Tournament Website (if available): https://www.foothillshockey.org/program/all-american-classic/3464

Tournament Director Name: Bryan Smith

Address: PO Box 620775

City: Littleton

State: CO Zip Code: 80126 Phone: 970.389.7211 Email: tournaments@foothillshockey.org

Location: Edge Ice Arena & Foothills Ice Arena

Phone: _____

Address: 6623 S. Ward St - 2250 S. Kipling Street

City: Littleton - Lakewood

State: CO Zip Code: 80127 - 801

Will medical staff be on-site during this sanctioned event? ☐ Yes ☒ No

CHECK ALL THAT APPLY:

- | | | |
|--------------------------------------|---|--|
| ☐ Adult | ☐ 18U | ☐ Women |
| ☐ College | ☐ 16U | ☐ Girls 19U |
| ☐ Junior | ☐ 15U Tier I | ☐ Girls 16U |
| ☐ High School | ☒ 14U | ☐ Girls 14U |
| ☐ Sled | ☐ 13U Tier I | ☐ Girls 12U |
| ☐ Disabled | ☒ 12U | ☐ Girls 10U |
| | ☒ 10U | ☐ Girls 8U |
| | ☐ 8U (Full-ice Waiver) | ☐ Girls 8U (Half/Cross-ice) |
| | ☐ 8U (Half/Cross-ice) | |

Each tournament is required to verify that all participating teams are properly registered with USA Hockey or their country's federation.

A USA Hockey Official Team Roster Form (1-T) approved by the district or associate registrar shall be proof of proper registration and individual player age. Invitational tournaments shall not require player birth certificates for review.

Travel Permits are required for any team from an affiliate requiring travel permits. All Canadian Teams must have an approved travel permit from Hockey Canada or their member branch. An approved International Competition Travel form is required for all other foreign teams.

***USA Hockey Fee**

****Affiliate Fee**

☒ USA Hockey Sanction Fee (check payable to USA Hockey) \$1032 \$250.00
(International Travel Permit, Application for International Competition and fees are required for teams from outside North America in addition to the Invitational Tournament Application)

☒ Rocky Mountain District Fee (check payable to RMD) \$1033 \$50.00 \$50

*** Please fill in \$50 on the line below "Affiliate Fee" if hosting a youth, girls, or high school tournament on full ice (check payable to GARH)*

Some tournaments may be considered as "Special Events" and may require an additional fee.

AFFILIATE USE ONLY — IF REQUIRED

☒ Approved ☐ Not Approved

Date: 8/23/26

Signature: Sherry Beardshear

Title: Affiliate Registrar

Affiliate: Colorado

Phone: 720-273-2345

USA HOCKEY USE ONLY

☒ Approved ☐ Not Approved

Date: 8-31-2026

Signature: Darla Thompson

USA Hockey District Registrar or his/her designee

USA Hockey District: RMD Registrar

Phone: 972-365-3125

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT ALL RULES AND PROCEDURES OF THE TOURNAMENT AND AN APPROPRIATE CERTIFICATE OF INSURANCE FROM NON-USA HOCKEY MEMBERS.

Process application, payment, rules and certificate of insurance (if non-member) to your State's Associate Registrar.

Form 3-T-RM
Rev. 6/25