

2008 CRASH TEST RUGBY TOURNAMENT

UNIVERSITY OF REGINA
REGINA, SASKATCHEWAN
OCTOBER 18TH AND 19TH, 2008

Presented by: Regina Wheelchair Rugby Club
In collaboration with: Saskatchewan Wheelchair Sports Association
Sanctioned by: Saskatchewan Wheelchair Sports Association

Saskatchewan Wheelchair Sports Association
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GENERAL INFORMATION

Arrival: Please have teams arrive on Friday

Registration Fee: \$750.00/ team

Includes:

- airport transportation Friday, Sunday there will only be Transportation provided after 5:00 P.M. and Monday
- hotel to gym return transportation
- social tickets (the first ten people on the roster, if you require more tickets it's an additional \$20.00/ ticket)
- lunch provided
- goodie bag

Tournament Play:

- round robin
- there will be six(6) teams
- each team will have five(5) games, one against each team

Location:

Centre for Kinesiology Health and Sport
University of Regina
3737 Wascana Parkway
Regina, Saskatchewan
S4S 0A2

Games Start: -8:00 A.M. Saturday

HOTEL RESERVATIONS

The official hotel for the tournament is the Sandman Hotel and Suites

Host Hotel: Sandman Hotel and Suites
1800 Victoria Ave East
S4N 6E6

-Denny's is directly connected

- Moxie's is a few feet from the front entrance
- Brewsters is across the parking lot
- indoor pool and fitness centre

Reservation Information:

Please make your own reservations directly with the hotel

- book under Regina group #97094
- toll free: 1-800-SANDMAN
- rooms will be released September 15th

Room Information:

Cost \$115.00+taxes/ night

30 rooms reserved- 26 king executive suites, 4 wheelchair

King executive suites

- closed off bedroom with king sized bed
- living and dining area with pull-out bed
- kitchen with fridge and microwave
- large washroom

Wheelchair suite

- king sized bed
- wheel in shower (quite nice)

SOCIAL

Social:

- large banquet room on main floor of host hotel
- more details given upon arrival

Total # of staff: _____

Dietary

Does anyone on your team have special dietary concerns? If so, please explain: _____

Classification

Does anyone on your active roster require classification? Review? If so, please provide their name, where and when they were classified, and their current class:

Name	Current Class	When & Where they were Classified

**REGINA WHEELCHAIR RUGBY TOURNAMENT
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Transportation

Team: _____

Method of travel: _____

Airline & flight #: _____

Number of people on flight: _____

Number of additional wheelchairs: _____

Arrival:

Date: _____/_____/_____ time: _____

Departure:

Date: _____/_____/_____ time: _____

Will you need local transportation to the gym? Yes___ No___

Accommodation- rooming list (REMEMBER- book your own rooms!)

1. _____ and _____

2. _____ and _____

3. _____ and _____

4. _____ and _____

5. _____ and _____

6. _____ and _____

7. _____ and _____
8. _____ and _____

Note: please return both forms, with your cheque, to **Regina Wheelchair Rugby Club** by **September 7th, 2008** to enable planning for transportation, social, and goodie bags.

Regina Wheelchair Rugby Club
47 Sommerfeld Drive
Regina, Saskatchewan
S4V 0C6

REGISTRATION DEADLINE: SEPTEMBER 7TH, 2008