

Coaches, Parents, Athletes:

Enclosed is the entry form for the 2nd Annual Grandview Memorial Day Weekend Tournament.

**Deadline: Postmarked by May 8, 2009**

FOR ENTRY FORMS AND MORE INFORMATION ON INLAND EMPIRE EVENTS,  
GO TO OUR WEBSITE AT [www.ieaaau.org](http://www.ieaaau.org).

Shannon Springer, YVSA Event Director  
509-453-2696 or 509-388-1722  
509-457-0931 Fax  
[www.ieaaau.org](http://www.ieaaau.org) Web Site [Shannon@ieaaau.org](mailto:Shannon@ieaaau.org) E-mail

Yakima Valley Sports Authority  
PO Box 9757  
Yakima, Washington  
98909



**2nd Annual Grandview Memorial Day AAU Basketball Tournament**

May 22-24, 2008

Boys & Girls 2nd – 8th Grade



## 2nd Annual Grandview Memorial Weekend AAU Basketball Tournament May 22-24, 2009

- National Sanction:** Inland Empire District of the Amateur Athletic Union of the U.S.
- Local Sponsor:** Yakima Valley Sports Authority
- Contact:** Shannon Springer, YVSA Event Director / 509-453-2696 or 509-388-1722  
Email: [Shannon@ieaaau.org](mailto:Shannon@ieaaau.org)  
PO Box 9757, Yakima, WA 98909
- Site:** Yakima, WA
- Dates:** May 22-24, 2009  
**Registration Deadline: Postmark by May 8, 2009.**  
Teams are guaranteed 4 games
- Game Times:** Friday: 5:30pm, 6:45pm, 8:00pm, 9:15pm  
Saturday & Sunday: 9:00am, 10:15am, 11:30am, 12:45pm, 2:00pm, 3:15pm, 4:30pm, 5:45pm
- Divisions:** Boys & Girls: 2nd, 3rd, 4th, 5th, 6th, 7th, 8th Grade  
Grade Determining Date: The grade the participant will be in 2008/2009 school year.
- Entry Fee:** \$180.00. Membership fees are NOT included in the entry fee. Any checks returned NSF will be charged a \$35.00 fee. No entry fees refunded after the deadline date.  
Make checks payable to: Yakima Valley Sports Authority (YVSA)
- AAU Membership:** All players and coaches must have a 2009 AAU Card. Costs are: **Player \$12.00**  
**Coach: \$14.00.** **NOTE:** Anyone that coaches the team from the bench must also have an AAU card. AAU cards are valid through August 31, 2009. **REMEMBER:** Membership cards don't get you into the game for free. Only players that are playing are allowed into the game free. **Memberships can be purchased online:** [www.aausports.org](http://www.aausports.org).
- Roster:** The roster established at the time of the first game must be used throughout the entire tournament. No additions or changes are permitted.
- Rules:** 2008-2009 High School Federation Rules. Special Technical Foul Rule: Any technical foul or intentional foul, two points awarded and the ball out of bounds. Check coaches letter in your packet you will receive at the gym of your first game for additional rules.
- Scorekeeper:** Each team is to have ONE person to keep the individual score sheet that is provided by YVSA at the score bench. One scorekeeper will be allowed into the game at no charge. Score sheets provided by the YVSA must be left with the gym supervisor.
- Coaches:** Only ONE coach per team is allowed into the game free, but more than one may coach, but must pay admission and have a 2009 AAU card to sit on the bench.
- Admission:** The gyms are run by clubs. The money from the admissions goes back into their clubs for youth activities. Please inform you parents.  
**FRIDAY: ADULTS: \$3.00 STUDENTS: \$2.00**  
**SATURDAY/SUNDAY: ADULTS \$4.00 STUDENTS: \$3.00**

**2nd Annual Grandview Memorial Weekend AAU Tournament** May 22-24, 2009  
 2009 Team Registration Form



**Division (Circle one):**

**Boys:** 2nd 3rd 4th 5th 6th 7th 8th  
**Girls:** 2nd 3rd 4th 5th 6th 7th 8th

**Office Use Only**

Total Paid: \_\_\_\_\_  
 Check #: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Date Rec'd: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

Coach: \_\_\_\_\_

Address: \_\_\_\_\_

Coach Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Coach: AAU Card Number: \_\_\_\_\_

Phone: Home(\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone: Work(\_\_\_\_) \_\_\_\_\_

Phone: Home(\_\_\_\_) \_\_\_\_\_

Phone: Cell(\_\_\_\_) \_\_\_\_\_

Phone: Cell (\_\_\_\_) \_\_\_\_\_

Asst Coach Name: \_\_\_\_\_ Email \_\_\_\_\_ Asst Coach: AAU #: \_\_\_\_\_

<u>Name (First Last)</u>	<u>08-09 Grade</u>	<u>School</u>	<u>2009 AAU Card Number</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____
11. _____	_____	_____	_____
12. _____	_____	_____	_____

Return this page completed with an entry fee of \$180.00 by **May 8, 2009**.  
 Mail to: **Yakima Valley Sports Authority, PO Box 9757, Yakima, WA, 98909. FAX 509-457-0931**

Check one:  Master Card  VISA Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: Month: \_\_\_\_\_ Year: \_\_\_\_\_

**Convenience Fee of \$8.50 is added to Visa/Master Card Request.**

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