

Winter Invitational

February 12th and 13th, 2011

Local Sponsor: Selah B-Ball Club

Contact: Heather Shurtleff

(c) 509-480-2191 (w) 509-494-1520 (email) hshurtleff@firstam.com

Site: Wilson Middle School – Yakima, WA

Dates: February $12^{\text{th}} - 13^{\text{th}}$

Registration Deadline: Postmark by January 30, 2011

NOTE: SPACE IS EXTREMELY LIMITED. REGISTRATIONS WILL BE ACCEPTED ON A FIRST COME, FIRST SERVE BASIS.

Game Times: Games will begin at 9:00am on Saturday and Sunday

Divisions: Girls: 3rd – 8th Grade / Boys: 3rd – 8th Grade / Trophies awarded to each first play team **Entry Fee:** \$200.00.

Membership fees are NOT included in the entry fee.

No entry fees refunded after the deadline date.

Make checks payable to: Selah Swishing Stars

AAU Membership: All players and coaches must have a valid AAU Card.

NOTE: Anyone that coaches the team from the bench must also have an AAU card

Memberships can be purchased online: 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. Players must have cards purchased in advance to participate.

Scorekeeper: Each team is to have ONE person to keep the individual score sheet that is provided at the score bench.

Coaches: Only ONE coach per team is allowed into the game free. More than one may coach, but must pay admission and have an AAU card to sit on the bench.

Admission: SATURDAY/SUNDAY: ADULTS \$4.00 STUDENTS: \$3.00

DEADLINE: Postmarked by **January 30, 2011**(\$35.00 fee will be charged on NSF checks)



Winter Invitational

2011 Team Registration Form

| Team Name: | |
|---|---------------------------------|
| | Email Address: |
| Address: | City/State/Zip: |
| Home Phone: () | Cell Phone: () |
| Coach Name: | _ Coach E-mail |
| Address: | City/State/Zip: |
| Coach Home Phone: () | Cell Phone: () |
| Coach AAU #: | |
| Check One: | |
| Girls 4th Grade Boys 4th C | Grade |
| Girls 6th Grade | |
| Name : (First/Last) | Grade 2010-2011 AAU Card Number |
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | |
| 12 | |
| Return this page completed with an entry fee of \$200.00. | |
| Mail To: Selah Basketball Club 800 Braeburn Court Selah, WA 98942 | |
| Office Use Only: | |

Total Paid: _____ Check #: ____ Date Rec'd: _____