AAU Participants:

Enclosed is the entry form for the 1st Annual Bomber Bash Tournament.

Registration Dates: Now – November 1st, 2010 - \$180 No entries accepted after November 1st, 2010

NOTE:

Washington State has passed a law requiring youth coaches, athletes and parents/guardians complete certain criteria regarding the recognition and treatment of head injuries during sporting events. All participating teams must complete the attached form and return it with the entry form.





1st Annual Bomber Bash AAU Basketball Tournament

November 5-7, 2010

Boys: 3rd – 6th Grade

1st Annual Bomber Bash AAU Basketball Tournament

November 5-7, 2010

National Sanction: Inland Empire District of the Amateur Athletic Union of the U.S.

Local Sponsor: TC Bomb Squad / Richland High Booster Club

Contact: Nat Cowell, TC Bomb Squad Administrator / 509-430-3602

Email: admin@tcbombsquad.com

Mailing Address: 1826 Newhaven Loop, Richland, WA 99352

Site: Richland, WA

Dates: November 5th-7th, 2010 – All teams are guaranteed 4 games minimum

Registration Deadline: Now - November 1st, 2010 - \$180

Divisions: Boys: 3rd, 4th, 5th and 6th Grade

Grade Determining Date: The grade the participant will be in 2010/2011 school year.

Entry Fee: \$180 per team NO ENTRIES WILL BE ACCEPTED AFTER November 1st! Membership fees are

NOT included in the entry fee. Any checks returned NSF will be charged a \$35.00 fee. No entry

 $\underline{\text{fees refunded after the deadline date}}.$ Make checks payable to: TC Bomb Squad

AAU Membership: All players and coaches must have a 2011 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, 2011. **REMEMBER:** Membership cards don't get you into the game for free. Only players that are playing are allowed into the game free. **Memberships**

must be purchased online: www.aausports.org.

The Lystedt Law: Washington State has passed a law requiring youth coaches, athletes and parents/guardians

complete certain criteria regarding the recognition and treatment of head injuries during sporting events. All participating teams must complete the attached form and return it to the YVSA office

with the entry form.

Tournament Rules:1. The roster presented at sign in at the time of the first game must be used throughout the entire tournament. No additions or changes are permitted.

A player may play for ONE team only during the tournament.

3. Scorekeepers – each team is to have ONE person to keep the individual score sheet that is provided in your coach's packet. One scorekeeper per team will be allowed into the game free

of charge. Please leave scoresheets with the gym supervisor after your game.

4. Coaches – Only the head coach and listed assistant coach are allowed into the game free.

5. Admission fees – The gyms will be run by the RHS Booster Club, proceeds from admissions and concessions go to them. Friday: \$3 Adult, \$2 Student. Saturday: \$4 Adult, \$3 Student.

Sunday: \$4 Adult, \$3 Student. PLEASE INFORM YOUR PARENTS!

Rules of play: 2010-2011 High School Federation Rules, with the following exceptions:

1. No shot clock

- 2. 3rd thru 6th grade teams will use the women's size basketball (28.5").
- 3. Quarters: 3rd & 4th grade: 6 minutes / 5th & 6th grade: 7 minutes
- 4. Overtime: 2 minutes each
- 5. Technical or Intentional Fouls 2 points awarded and the ball out of bounds.
 - a. One technical foul on a coach or fan and he/she is ejected from the gym. One technical on a player and the player must sit on the bench for the remainder of the game. Officials and gym administrators have the right to eject a fan, player or coach. Coaches and fans must leave the gym completely.

1st Annual Bomber Bash AAU Basketball Tournament

November 5-7, 2010

AAU	
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Division	(Circle	one):
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Boys: 3rd 4th 5th 6th

Office Use Only	
Total Paid:	
Check #:	_
Name:	_
Data Boold:	

Team Name:			Name/Number (required):
Contact Person:		Coach:	
Address:		Coach Add	ress:
City/State/Zip:		City/State/	Zip:
E-mail Address:		Coach: AAI	J Card Number:
Phone: Home()		E-mail Add	ress:
Phone: Work()		_ Phone: Ho	me()
Phone: Cell()		Phone: Cel	I ()
Asst Coach Name:	Email		Asst Coach: AAU #:
Name (First Last)	<u>10-11 Grade</u>	<u>School</u>	2011 AAU Card Number (required)
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12			

Return this page completed with an entry fee of \$180 by October 18th or \$200 by November 1st.

Mail to: TC Bomb Squad, 1826 Newhaven Loop, Richland, WA, 99352.

Signatur	Date:	

Club Compliance Form

CONCUSSION LAW REQUIREMENTS Club Compliance Statement

HB1824, otherwise known as the Zachery Lystedt Law, was signed into law on May 14, 2009. It requires, as of July 26, 2009, that additional steps be taken regarding concussions in private non-profit youth athletic programs using school district facilities.

This bill requires training and documentation which AAU Member Clubs must adhere to. AAU players and their parents/guardians must meet these minimum requirements:

- 1. All AAU member coaches will have to take training on the nature and risk of concussions and head injury including continuing to play after a concussion or head injury.
- 2. On a yearly basis, a concussion and head injury information sheet shall be signed and returned by the youth athlete and athlete's parents/guardian prior to the youth athlete's initiating practice or competition.
- 3. All athletes suspected of suffering a concussion or brain injury will be removed from practice or competition and not returned to play until cleared in writing by a licensed health care provider trained in the evaluation and management of concussions (Medical Doctors, Doctor of Osteopathy, Advanced Registered Nurse Practitioner, Physicians Assistants, and *Certified* Athletic Trainers).

TC Bomb Squad, AAU Event Operator

Compliance Statement for HB1824 Youth Sports-Head Injury Policies

This page must accompany each Tournament Entry form. Participation in AAU Sanctioned Events will not be granted until this page is returned and requirements of this application are complete and approved by the TC Bomb Squad, an AAU Member Club and event operator.

Team:	Division:	
Club	Club Number:	
As the AAU Club contact I	verify all coaches, athletes and their parent/guardian ha	ve complied with mandated
policies for the management	of concussions and head injuries as prescribed by HB	
policies for the management Signed:	of concussions and head injuries as prescribed by HB	