

W H I T M A N

B A S K E T B A L L

CHARTER MEDIA SPRING JAMBOREE PRESENTED BY LES SCHWAB

DATES: March 3, 2013

LOCATION: Sherwood Athletic Center at Whitman College.

DIVISIONS: BOYS 3-8TH Grade. 4 Game Guarantee.

ENTRY FEE: \$100. (make checks payable to Whitman Men's Basketball)

WHY WHITMAN BASKETBALL TOURNAMENTS?

THE BEST FACILITIES:

Four recently renovated, full size courts— all under one roof!
Players have the opportunity to play in the same facilities as
Whitman's Men's Basketball team.

THE BEST OFFICIATING:

Games officiated by Whitman Men's Basketball players and coaches.

THE BEST CAUSE:

All proceeds help fund the Whitman Men's Basketball program!

CONTACT:

Bryce Douglas, Event Director

509-527-5212, douglabb@whitman.edu

Men's Basketball

Whitman College

345 Boyer Ave

Walla Walla WA 99362

WHITMAN BASKETBALL

TOURNAMENT RULES

LOCAL SPONSOR: Whitman Basketball, Charter Media, Les Schwab

ROSTER: The roster established at the time of the first game must be used throughout the entire tournament. No additions or changes are permitted.

COACHES: Only ONE coach per team is allowed in to the game free. More than one person may coach, but must pay admission.

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.

RULES: 2012-13 High School Federation Rules. Exceptions will be noted in coaches packet (coaches will get this on day of tournament at check in station).

SCOREKEEPER: Each team is to have ONE person to keep the individual score sheet that is provided by event director.

ADMISSION: The gyms are run by Whitman Basketball. The money from admissions goes directly to support the Whitman College Men's Basketball program. All spectators are expected to pay a daily admissions fee— tournament passes WILL be available.



CHARTER MEDIA SPRING JAMBOREE PRESENTED BY LES SCHWAB MARCH 3rd

GRADE (CIRCLE ONE): 3 4 5 6 7 8

TEAM NAME: _____

CONTACT PERSON: _____

CITY/STATE/ZIP: _____

EMAIL: _____

PHONE (HOME): _____

PHONE (CELL): _____

COACH: _____

COACH ADDRESS: _____

CITY/STATE/ZIP: _____

COACH AAU CARD #: _____

EMAIL: _____

PHONE: _____

NAME (FIRST, LAST)	'12-'13 GRADE	SCHOOL	AAU CARD NUMBER
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Return this completed form with an entry fee of \$100 by February 25th, 2013

Mail to:

**WHITMAN COLLEGE MEN'S BASKETBALL,
345 BOYER AVE, WALLA WALLA, WA 99362
FAX: 509-527-5960**

Payment must be made by cash or check.

Checks made out to: WHITMAN COLLEGE MEN'S BASKETBALL

SIGNATURE: _____

DATE: _____

WHITMAN BASKETBALL 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 all teams must adhere to. Players and their parents/guardians must meet these minimum requirements:

- 1.All 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).

WHITMAN BASKETBALL

Compliance Statement for HB1824

Youth Sports-Head Injury Policies

This page must accompany each Tournament Entry form. Participation will not be granted until this page is returned and requirements of this application are complete and approved by Whitman Basketball.

Team: _____ Division (IF NECESSARY): _____

Club (IF NECESSARY): _____ Club Number (IF NECESSARY): _____

As team contact I verify all coaches, athletes and their parent/guardian have complied with mandated policies for the management of concussions and head injuries as prescribed by HB 1824, section 2.

Signed:

Team Contact:

Position with Team _____

Date signed _____

