

## **20th ANNUAL HANFORD HOLIDAY HOOPFEST**

### **December 9<sup>th</sup> & 10<sup>th</sup>, 2017**

- LICENSED:** Inland Empire District of the Amateur Athletic Union
- HOST:** Hanford High School Basketball Programs and Hanford Falcon Boosters (AAU Club)
- COST:** \$250.00
- DATE & SITE:** December 9<sup>th</sup> & 10<sup>th</sup>, 2017 in Richland, WA (Saturday & Sunday)
- DIVISIONS:** Boys: 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> Grade/ Girls: 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> Grade
- GAMES:** All teams will play at least 4 games.
- TIMES:** From 8:00 am to 8:15 pm on Saturday, and 8:00 am to 8:15 pm on Sunday.
- RULES:** 7 minute quarters. 2017-2018 High School Rules.
- FORMAT:** This event is for teams of all ability levels. The formats will be determined based on the number of teams in each division. Five-team round-robin and six or eight-team cross-pools with A, B, and C divisions were used exclusively so all Saturday and most Sunday games could be pre-scheduled due to constraints from teams with League games and/or out-of-town travel.
- AWARDS:** Individual awards, for up to 10 players per team, will be given to the first place teams within each division.
- DEADLINE:** This tournament sells out! Registration will close when all available gym space is filled. The tournament was full almost two weeks before the tournament started last year. Register Online: <https://j116.app.link/rqXSm6f2ZG> (must pay w/ debit or credit card) No ENTRY FEES REFUNDED after the deadline date. Make checks payable to: Hanford Boosters  
Mail payment and entry to: 2641 Harris Avenue, Richland, WA 99354
- CONTACT:** Marsha Milliken 509-942-8053; or e-mail: [mkmilliken@msn.com](mailto:mkmilliken@msn.com)
- LODGING:** Motel listing with tournament rates is available on request.
- ROSTERS:** Players, or teams, may play up a grade but not down a grade (exceptions may be made for very small schools). Boys and girls can only play in their division (e.g. girls will only play in the girls division) and a player may only be assigned to **one** team during the tournament. The roster established for the first game will be checked and must be used throughout.
- SCOREKEEPER:** Each team is to have ONE person to keep the individual score sheet that is provided.
- 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.
- MEMBERSHIP:** All participants must have a current AAU membership. AAU membership may not be included as part of the entry fee to the event. AAU Youth Athlete membership must be obtained before the competition begins except where the event operator has a laptop available with an internet connection. Be Prepared: Adult and Non Athlete memberships are no longer instant and cannot be applied for at event. Please allow 10 days for membership to be processed. Participants are encouraged to visit the AAU web site [www.aausports.org](http://www.aausports.org) to obtain their membership

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**December 9-10, 2014** Entry Fee: **\$250.00** Make check payable to: **Hanford Falcon Boosters**

Mail this form and fee to: **Marsha Milliken, 2641 Harris Avenue, Richland, WA 99354**

CIRCLE **3B 4B 5B 6B 7B 8B**  
DIVISION: **3G 4G 5G 6G 7G 8G** CITY & TEAM NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHONE (H): \_\_\_\_\_ (W): \_\_\_\_\_ CELL: \_\_\_\_\_

COACH: \_\_\_\_\_ AAU CARD NO: \_\_\_\_\_

ASST. COACH: \_\_\_\_\_ AAU CARD NO: \_\_\_\_\_

CLEARLY PRINT PLAYER NAME (First and Last)	2017 AAU CARD #	SCHOOL
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1. _____	_____	_____
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2. _____	_____	_____
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3. _____	_____	_____
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4. _____	_____	_____
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5. _____	_____	_____
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6. _____	_____	_____
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7. _____	_____	_____
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8. _____	_____	_____
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9. _____	_____	_____
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10. _____	_____	_____
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11. _____	_____	_____
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12. _____	_____	_____
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**List any scheduling requests:**

Team Ranking for Seeding (Please Check One):

Strong \_\_\_\_\_ Above Avg \_\_\_\_\_ Average \_\_\_\_\_ Below Avg \_\_\_\_\_ Weak \_\_\_\_\_

# AAU Member Club Compliance Form

## CONCUSSION LAW REQUIREMENTS

**Required by AAU Event Operators to participate in AAU sanction events.**

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).

### **Richland Youth Sports Authority** 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 Richland Sports Authority.**

Team: \_\_\_\_\_ Division: \_\_\_\_\_

Club \_\_\_\_\_ Club Number: \_\_\_\_\_

As the AAU Club 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:

\_\_\_\_\_  
AAU Club Contact

\_\_\_\_\_  
Position with AAU Club

\_\_\_\_\_  
Date signed