

# 6th Annual Synergy Shootout AAU Basketball Tournament

## February 14<sup>th</sup>-16<sup>th</sup>, 2015

- National Sanction:** Inland Empire District of the Amateur Athletic Union of the U.S.
- Sponsor:** Kittitas Basketball
- Contact:** Rocky Gibson, 509-929-1014  
Email: [rocky\\_gibson@ksd403.org](mailto:rocky_gibson@ksd403.org)  
Mailing Address: 50 Meadowbrook Lane, Ellensburg, WA 98926
- Site:** Ellensburg/Kittitas, WA
- Dates:** February 14<sup>th</sup>-16<sup>th</sup>, 2015 – All teams are guaranteed 4 games  
**Registration Deadline:** February 6<sup>th</sup> - \$200
- Game Times:** Saturday, Sunday, & Monday : 9:00am, 10:15, 11:30, 12:45pm, 2:00, 3:15, 4:30, 5:45, 7:00
- Divisions:** Boys & Girls: 1<sup>st</sup>, 2<sup>nd</sup>, 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  
Grade Determining Date: The grade the participant will be in 2014/2015 school year.
- Entry Fee:** **\$200 received by February 6<sup>th</sup>** . NO ENTRIES WILL BE ACCEPTED AFTER FEBRUARY 6th!  
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: Ellensburg Synergy Softball.
- AAU Membership:** All players and coaches must have a 2011 AAU Card. **NOTE:** Anyone that coaches the team from the bench must also have an AAU card. AAU cards are valid through August 31, 2015.  
**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](http://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 above mailing address.
- Tournament Rules:**
1. The roster established at the time of the first game must be used throughout the entire tournament. No additions or changes are permitted.
  1. A player may play for ONE team only during the tournament.
  2. Girls cannot play on boys teams and boys cannot play on girls teams.
  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 score sheets with the gym supervisor after your game.
  4. Coaches – Only ONE coach per team is allowed into the game free, but more than one may coach.
  5. Admission fees – \$4 Adult, \$3 Student each day. PLEASE INFORM YOUR PARENTS!
- Rules of play:** 2014-2015 High School Federation Rules, with the following exceptions:
1. No shot clock
  2. 2<sup>nd</sup> and 3<sup>rd</sup> grade boys and girls divisions will use the Junior basketball (27.5") and 4<sup>th</sup> -8<sup>th</sup> grade girls and boys will use women's size basketball (28.5").
  3. Quarters: 2nd – 4th grade: 6 minutes / 5th – 8th 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.

**6th Annual Synergy Shootout AAU Tournament** February 14<sup>th</sup>-16<sup>th</sup>, 2015  
 2015 Team Registration Form

**Office Use Only**

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



**Division (Circle one):**

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

Team Name: \_\_\_\_\_ AAU Club Name/Number (required): \_\_\_\_\_

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>2014-2015 Grade School</u>	<u>2015 AAU Card Number (required)</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____

Return this page completed with an entry fee of \$200 by February 6<sup>th</sup>.

Mail to: **Ellensburg Synergy Softball, 50 Meadowbrook Lane, Ellensburg, WA, 98926.**

Signature \_\_\_\_\_ 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).

## Ellensburg Synergy Softball Club, 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 Ellensburg Elite, 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 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