# The Warehouse Athletic Facility Presents

# The 16th Annual AAU SPRING FLING Basketball Tournament

Saturday, March 24th & Sunday, March 25th, 2018

**LOCATION:** 800 North Hamilton, Spokane, Washington 99202

(Directly across from Gonzaga University)

**DIVISIONS**: Boys & Girls, 7<sup>th</sup>-9<sup>th</sup> Grade

**ENTRY FEE:** \$300.00 (Make checks payable to The WAREHOUSE)

**GAMES:** Teams will be guaranteed at least four (4) games. Games will be scheduled beginning Saturday, March 24<sup>th</sup> and continue through Sunday, March 25<sup>th</sup>, 2018.

**AAU SANCTIONING:** The WAREHOUSE AAU Spring Fling basketball tournament is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2018 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: <a href="www.ieaau.org">www.ieaau.org</a> or by phone:(509) 453-2696. The card fee is <a href="not included">not included in registration</a>. <a href="All rosters will be checked">All rosters will be checked</a>. Individuals without cards will result in team disqualification from the tournament.

**REGISTRATION:** Team registration form and entry fee, must be submitted by Monday, March 12, 2018.

#### Please send tournament registration form and entry fee to:

The WAREHOUSE

P.O. Box 9786 Phone: (509) 484-2670 Spokane, WA 99209 Fax: (509) 484-2669

*Please Note:* Team roster may be modified at any time prior to the first game by written notice to the tournament director. No additions or changes will be permitted following the start of the first game. The use of a non-registered player will result in disqualification of the team for the entire tournament.

**AWARDS:** Awards will be given for 1<sup>st</sup> and 2<sup>nd</sup> place in each division.

**REFUND POLICY:** Tournament cancellations made prior to March 12, 2018 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after March 12, 2018. **This refund policy will be enforced in order to ensure the continued integrity of our tournaments.** If you have any questions, please contact Jared at (509) 484-2670 or <a href="mailto:jared@warehouseathletics.com">jared@warehouseathletics.com</a>.

TO PAY REGISTRATION FEE BY CARD PLEASE REGISTER ONLINE AT www.warehouseathletics.com

**REGISTRATION DEADLINE: MONDAY, MARCH 12, 2018** 



• This event is licensed by the Amateur Athletic Union of the

• AAU membership must be obtained before the competition begins except where the event operator has a laptop available with an internet connect. Participants are encouraged to visit the AAU web site <a href="https://www.aausports.org">www.aausports.org</a> to obtain their membership.

• All participants must have a current AAU membership. AAU membership may not be included as part of the entry fee to the event.

U. S., Inc.



Team Registration Form
Registration Deadline: Received by March 12, 2018

# PLEASE PRINT CLEARLY

| Contact Person:   | Cell Phone: (                                      | )  |          |
|---|--|--|----------|
| Contact Person:Address:   | City:  | State:Zi   | p:       |
| Head Coach:   | Cell Phone   | :()  |          |
| Coach/Contact Email Address: (RE  | QUIRED):   |  |          |
| Head Coach 2018 AAU #   | O'' D  |  |          |
| Team Name:  | City R   | epresenting:   | h 0040   |
| Saturday  | /, March 24" & S                                   | unday, March 25°                                       | ', 2018  |
|   | Division (checl                                    |  |          |
| GIRLS   |  | BOYS   |          |
| 7 <sup>th</sup> Grade Girls<br>8 <sup>th</sup> Grade Girls  |  | 7 <sup>th</sup> Grade Boy<br>8 <sup>th</sup> Grade Boy | /S       |
| 9 <sup>th</sup> Grade Girls   |  | 9 <sup>th</sup> Grade Boy                              | /5<br>/e |
| All AAU registration numbers will b   | e verified through your loc                        |  | 73       |
| 7 iii 7 ii 70 Togisii alion mambolo wiii b  | o vormou unough your loc                           | our recoolation.                                       |          |
| Player Name   | School   | 2018 AAU #   |          |
| 1   |  |  |          |
| 2   |  |  |          |
| 3   |  |  |          |
|   |  |  |          |
| 4   |  |  |          |
| 5   |  |  |          |
| 6   |  | · <del></del>  |          |
| 7   |  |  |          |
| 8   |  |  |          |
| 9   |  |  |          |
| 10  |  |  |          |
| Assistant Coach:  |  |  |          |
| Assistant Coach:  |  |  |          |
| Teams will be accepted into the too<br>considered FULLY registered when<br>SEND REGISTRATIONS AND FE<br>The WAREHOUSE<br>P.O Box 9786 | urnament on a first come-<br>n COMPLETE roster and |  | ed.      |
| Spokane, WA 99209   |  | Total Enclosed   | \$       |
| Phone: (509) 484-2670<br>Fax: (509) 484-2669  | Payment By:  | Check Money Order                                      | CVCH     |
| I aa. (303) 404-2003  | rayılıtılı DV:                                     | CHECK WICHEY CIGHT                                     | CASH     |

TO PAY REGISTRATION FEE BY CREDIT CARD PLEASE REGISTER ONLINE AT www.warehouseathletics.com

## **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).

### **Warehouse Athletic Facility**

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 Warehouse Athletic Facility.

| 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 |  |  |