

## 25th ANNUAL STEVE TALBOT/WENATCHEE AAU INVITATIONAL BASKETBALL TOURNAMENT

BOYS – January 25, 26, 27, 2013

GIRLS – March 15, 16, 17, 2013

Boys' Divisions: 4<sup>th</sup> grade, 5<sup>th</sup> grade, 6<sup>th</sup> grade, 7<sup>th</sup> grade and 8<sup>th</sup> grade (Deadline January 18th)

Girls' Divisions: 4<sup>th</sup> grade, 5<sup>th</sup> grade, 6<sup>th</sup> grade, 7<sup>th</sup> grade and 8<sup>th</sup> grade (Deadline March 8th)

Each team will be guaranteed four games. A limited number of teams will be allowed in the tournament.

**Each player may play on only one team and all players should have numbers on the front and the back of their jersey.**

AAU cards are required for all participants. Cards may be obtained from:

[www.aausports.org](http://www.aausports.org)

2012-2013 Official high school rules will be used, except as follows:

1. Over and back will be called during the girls tournaments and a 30-second clock will not be used.
2. Technical Fouls – team will be automatically awarded two (2) points plus ball out of bounds.
3. Boy's grades 4<sup>th</sup>, 5<sup>th</sup>, and 6<sup>th</sup> will use the women's basketball.
4. No pressing (half or full-court) when you have a 15 point advantage.
5. All division will play 8 minute quarters, with running time in the fourth quarter with a 20 point lead.

Entry fees: \$200.00

Make checks payable to Wenatchee AAU and mail to:

Boys: Kay Blakney  
600 Elliott Ave S.  
Wenatchee, WA 98801  
509-663-3119 home or 509-670-1363 cell  
[Kblakney@tumwater.net](mailto:Kblakney@tumwater.net)

Girls: Phil Buterbaugh  
PO Box 4049  
Wenatchee, WA 98807  
509-679-8714  
[Specialtycoating@hotmail.com](mailto:Specialtycoating@hotmail.com)

No entry will be accepted without payment of entry fee and submission of rosters. Entries will be accepted after that date on a space available basis but the roster may not be in our program.

- This event is sanctioned by the Amateur Athletic Union of the U.S., Inc
- All Participants must have a current AAU Membership
- AAU membership may not be included as part of the entry fee to the event
- 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 website [www.aausports.org](http://www.aausports.org) to obtain their membership.

**BOYS DIVISIONS:** GRADE: 4 5 6 7 8 (circle one)

**GIRLS DIVISIONS:** GRADE: 4 5 6 7 8 (circle one)

2013

**TYPE OF TEAM:** LOCAL or SELECT (circle one)

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**PLEASE ADD ANY ADDITIONAL INFORMATION TO THE BACK OF THIS FORM THAT MIGHT HELP US WITH SEEDING THE TOURNAMENT.**

TEAM NAME: \_\_\_\_\_

NAME (please print or type)	A.A.U. NUMBER	DATE OF BIRTH Month/day/year	AGE	GRADE	UNIFORM UNUMBER Light/Dark	HEIGHT FT. / INCHES

PLEASE COMPLETE THIS FORM AND MAIL/EMAIL ENTRY FEE TO:

I CERTIFY THAT ALL INFORMATION IS CORRECT AND  
EACH ATHLETE LISTED ON ROSTER HAS AN A.A.U. CARD.

**BOYS: Kay Blakney**

600 Elliott Ave S.

Wenatchee, WA 98801

509-663-3119 home or 509-670-1363 cell

[Kblakney@tumwater.net](mailto:Kblakney@tumwater.net)

**GIRLS:**

**Phil Buterbaugh**

P.O. Box 4049

Wenatchee, WA 98807

509-679-8714

[Specialtycoating@hotmail.com](mailto:Specialtycoating@hotmail.com)

COACHES SIGNATURE: \_\_\_\_\_

COACHES NAME \_\_\_\_\_

COACHES ADDRESS \_\_\_\_\_

COACH'S PHONE NUMBER: \_\_\_\_\_

COACH'S EMAIL ADDRESS: \_\_\_\_\_

**NO ENTRY WILL BE ACCEPTED WITHOUT PAYMENT OF ENTRY FEE  
AND SUBMISSION OF ROSTER.**

CONTACT PERSON'S NAME: \_\_\_\_\_

CONTACT PERSON'S ADDRESS: \_\_\_\_\_

CONTACT PERSON'S PHONE NUMBER: \_\_\_\_\_

CONTACT PERSON'S E-MAIL ADDRESS: \_\_\_\_\_

## **WENATCHEE AREA HOTEL/MOTEL**

<b>CEDARS INN</b>	<b>509-886-8000</b>	<b>1-800-358-2074</b>
<b>HOLIDAY LODGE</b>	<b>509-663-3167</b>	<b>1-800-722-0852</b>
<b>LA QUINTA INN &amp; SUITES</b>	<b>509-664-6565</b>	
<b>HOLIDAY INN EXPRESS</b>	<b>509-663-6355</b>	
<b>FOUR SEASONS INN</b>	<b>509-884-6611</b>	<b>1-800-223-6611</b>
<b>ORCHARD INN</b>	<b>509-662-3443</b>	
<b>RIVERS INN</b>	<b>509-884-1474</b>	
<b>WESTCOAST WENATCHEE CENTER</b>	<b>509-662-1234</b>	
<b>COMFORT INN</b>	<b>509-662-1700</b>	
<b>COMFORT SUITES</b>	<b>509-662-1818</b>	
<b>RED LION</b>	<b>509-663-0711</b>	
<b>BEST WESTERN CHIEFTAIN INN</b>	<b>509-665-8585</b>	
<b>SPRINGHILL SUITES</b>	<b>509-665-3971</b>	
<b>MOONLIGHT MOTOR LODGE</b>	<b>509-663-5157</b>	<b><a href="http://moonlightmotorlodge.com">moonlightmotorlodge.com</a></b>

**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).

**Wenatchee Youth Basketball AAU Club**

**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 Wenatchee Youth Basketball AAU Club.**

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
_____	_____	_____