

2nd Annual First Time Hoop Tournament AAU Basketball

Site: Yakima, Washington.

Dates and Deadlines: Postmark November 13, 2000

Postmark November 13 , 2000 November 24^{th} and 26^{th} , 2000 Boys' 1^{st} , 2^{nd} and Girl's 2^{nd} , 3^{rd}

Entry Fee: \$100 Make checks out to Inland Empire AAU

Any checks returned NSF will require a \$25 charge.

Games: All teams will play three (3) games.

Game Times: Friday: (All teams play Friday) 5:30pm, 6:45pm, 8:00pm and 9:15pm

Saturday: 9:00am, 10:15am, 11:30am, 12:45pm, 2:00pm, 3:15pm, 4:30pm Sunday: 9:00am, 10:15am, 11:30am, 12:45pm, 2:00pm, 3:15pm, 4:30pm

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AAU Membership: All athletes and head coaches that participate in any AAU event must have a 2001 AAU

card. Athlete membership cards cost \$10 and coach cards are \$12. These cards are valid September 1, 2000 – August 31, 2001 for all sanctioned AAU events in any of the sports that make up the AAU program. The membership provides the best supplemental accident insurance for the athlete during official practices and sanctioned competitions.

Roster: The roster must be the same as the league roster, no additions to league roster will be

allowed for this Tournament. Teams have been invited and will be placed based on their **League Performance**, we will use the standings from the first four games to determine in which division they will play in. Check your special invitation for information.

Rules: 2000-2001 High School Federation Rules. Special Technical Foul Rule: Any technical

foul, two points awarded and the ball out of bounds. Check coach's letter in your packet

you will receive at the gym of your first game.

Awards: Individual awards to all teams in each division.

Mail Entries To: AAU, PO Box 9603, Yakima, WA 98909

*Entry form and fees must be included.

Reminder: Teams will play in a division of like teams. Games will be played on Friday Night

and Saturday and Sunday.

Second Annual

First Time ${}^{\textbf{66}}\mathbf{AAU}^{\textbf{99}}$ Hoop Tournament \square

Team Registration Form Office Use Only Total Paid: Coach Cards Pd: Contact Person _____ Home Phone: (____) Player Cards Pd: ____to___ Address: _____ City/State/Zip: Club #_____ Work Phone: (_____) _____E-mail Address: _____ Coach Name: ______Coach E-mail Address: _____ Coach Home Phone: (_____) ____ Work Phone: (____) Team Name:_____ City Representing:_____ **Check One:** ___Girls 2nd Grade ____Girls 3rd Grade ____Boys 1st Grade ____ Boys 2nd Grade Name (First Last) Birth date 2001 AAU Card School

Mail Entry Fee of \$100 plus this entry form to: AAU PO Box 9603 Yakima, Washington 98909