

The Warehouse Athletic Facility  
PRESENTS  
"Jump the Gun" Jamboree 2015  
A Pre-Season Tune-Up  
An AAU Licensed Event  
Saturday - Sunday , October 24-25, 2015

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

DIVISIONS: Boys & Girls, 4<sup>th</sup>-9<sup>th</sup> Grade

COST: \$70/ game- minimum of two games- maximum of four games.

GAMES: Teams may choose to play two, three, or four games and play on either Saturday or Sunday, or both days. In order to provide the most productive tune-up opportunity, we will attempt to place teams with opponents of similar experience and skill levels. Please indicate what best describes your team's playing level on the attached registration form. Options are Novice, Competitive, or Elite. Games will begin at approximately 9:00am Saturday morning and finish approximately 3:00pm on Sunday afternoon.

AAU SANCTIONING: The WAREHOUSE AAU "Jump the Gun" basketball jamboree is licensed by the Amateur Athletic Union of the U.S., Inc. All participating players and coaches must have a 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked . Individuals without cards will result in team disqualification from the event.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, October 12, 2015:

Please send jamboree registration and fee to:

The WAREHOUSE

P.O. Box 9786

Spokane, WA 99209

Phone: (509) 484-2670

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 event.

REFUND POLICY: Team cancellations made prior to October 12, 2015 will receive a 75% refund of the total paid entry fee. No refunds will be given for team cancellations made after October 12, 2015. This refund policy will be enforced in order to ensure the continued integrity of our events. If you have any questions, please contact Jared at (509) 484-2670 or [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

REGISTRATION DEADLINE : MONDAY, OCTOBER 12, 2015

# "Jump the Gun" Jamboree 2015

## Team Registration Form

Registration Deadline: Received by October 12, 2015

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_

Coach 2016 AAU # \_\_\_\_\_

Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

Circle what best describes your team's current experience & skill level: NOVICE -COMPETITIVE- ELITE

**Saturday -Sunday , October 24-25, 2015**

Division (check one):

GIRLS

- \_\_\_\_\_ 4<sup>th</sup> Grade Girls
- \_\_\_\_\_ 5<sup>th</sup> Grade Girls
- \_\_\_\_\_ 6<sup>th</sup> Grade Girls
- \_\_\_\_\_ 7<sup>th</sup> Grade Girls
- \_\_\_\_\_ 8<sup>th</sup> Grade Girls
- \_\_\_\_\_ 9<sup>th</sup> Grade Girls

BOYS

- \_\_\_\_\_ 4<sup>th</sup> Grade Boys
- \_\_\_\_\_ 5<sup>th</sup> Grade Boys
- \_\_\_\_\_ 6<sup>th</sup> Grade Boys
- \_\_\_\_\_ 7<sup>th</sup> Grade Boys
- \_\_\_\_\_ 8<sup>th</sup> Grade Boys
- \_\_\_\_\_ 9<sup>th</sup> Grade Boys

All AAU registration numbers will be verified through your local Association. Provide all information requested.

Name: First	Last	School	2016 AAU #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____

Assistant Coach: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

Registration Payment

\_\_\_\_ Games @\$70/game= \$ \_\_\_\_\_

SEND REGISTRATIONS AND FEES TO:

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

Total Enclosed \$ \_\_\_\_\_  
Payment By: \_\_\_ Check \_\_\_ Money Order \_\_\_ VISA \_\_\_ MasterCard  
Cardholder's Name \_\_\_\_\_  
Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Signature \_\_\_\_\_ CVV # \_\_\_\_\_

The Warehouse Athletic Facility Presents  
The 14<sup>th</sup> Annual AAU  
Thanksgiving Turkey Shoot Basketball Tournament  
November 27<sup>th</sup> - 29<sup>th</sup>, 2015

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

DIVISIONS: Boys & Girls, 5<sup>th</sup>-8<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 Friday, November 27<sup>th</sup> and continue through Sunday, November 29<sup>th</sup>.

AAU SANCTIONING: The WAREHOUSE AAU "Turkey Shoot" basketball is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked . Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, November 16, 2015.

**Registrations and fees shall be sent to:**

The WAREHOUSE

P.O. Box 9786

Spokane, WA 99209

Phone: (509) 484-2670

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 November 16, 2015 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after November 16, 2015. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

**REGISTRATION DEADLINE: MONDAY, NOVEMBER 16, 2015**



# Turkey Shoot 2015 Team Registration Form

Registration Deadline: Received by November 16, 2015

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
 Head Coach 2016 AAU # \_\_\_\_\_  
 Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Friday, November 27<sup>th</sup> – 29<sup>th</sup>, 2015**

Division (check one):

GIRLS

BOYS

\_\_\_\_\_ 5<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 6<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 7<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 8<sup>th</sup> Grade Girls

\_\_\_\_\_ 5<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 6<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 7<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 8<sup>th</sup> Grade Boys

- This event is licensed 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 web site [www.aausports.org](http://www.aausports.org) to obtain their membership.

All AAU registration numbers will be verified through your local Association.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_  
 Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

SEND REGISTRATIONS AND FEES TO: The WAREHOUSE P.O Box 9786 Spokane, WA 99209 Phone: (509) 484-2670 Fax: (509) 484-2669	<table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;"><u>Registration Payment</u></td> </tr> <tr> <td style="width: 70%;">Registration Fee</td> <td style="text-align: right;">\$300.00</td> </tr> <tr> <td>Total Enclosed</td> <td style="text-align: right;">\$ _____</td> </tr> </table> Payment By: ___Check ___Money Order ___VISA ___MasterCard	<u>Registration Payment</u>		Registration Fee	\$300.00	Total Enclosed	\$ _____
<u>Registration Payment</u>							
Registration Fee	\$300.00						
Total Enclosed	\$ _____						

Cardholder's Name \_\_\_\_\_  
 Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Signature \_\_\_\_\_ CVV # \_\_\_\_\_

# 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

The Warehouse Athletic Facility Presents  
The 14<sup>th</sup> Annual AAU  
BRING IN SPRING Basketball Tournament  
Saturday, March 19<sup>th</sup> & Sunday, March 20<sup>th</sup>, 2016

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

DIVISIONS: Boys & Girls, 4<sup>th</sup>-6<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 19<sup>th</sup> and continue through Sunday, March 20<sup>th</sup>, 2016.

AAU SANCTIONING: The WAREHOUSE AAU "Bring in Spring" basketball tournament is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaa.org](http://www.ieaa.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked. Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, March 7<sup>th</sup>, 2016.

**Please send tournament registration and fee to:**

The WAREHOUSE

P.O. Box 9786

Spokane, WA 99209

Phone: (509) 484-2670

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 7<sup>th</sup> will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after March 7<sup>th</sup>, 2016. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

**REGISTRATION DEADLINE: MONDAY, MARCH 7, 2016**

## Bring in Spring 2016 Team Registration Form

Registration Deadline: Received by March 7, 2016

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
 Head Coach 2016 AAU # \_\_\_\_\_  
 Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Saturday, March 19<sup>th</sup> & Sunday, March 20<sup>th</sup>, 2016**

Division (check one):

GIRLS

\_\_\_\_\_ 4<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 5<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 6<sup>th</sup> Grade Girls

BOYS

\_\_\_\_\_ 4<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 5<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 6<sup>th</sup> Grade Boys

All AAU registration numbers will be verified through your local Association.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

SEND REGISTRATIONS AND FEES TO:

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

	<u>Registration Payment</u>
Registration Fee	\$300.00
Total Enclosed	\$ _____

Payment By: \_\_\_ Check \_\_\_ Money Order \_\_\_ VISA \_\_\_ MasterCard

Cardholder's Name \_\_\_\_\_  
 Account No. \_\_\_\_\_ Expiration date \_\_\_\_\_  
 Signature \_\_\_\_\_ CVV # \_\_\_\_\_

- This event is licensed 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 web site [www.aausports.org](http://www.aausports.org) to obtain their membership.



# 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:

4. 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.
5. 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.
6. 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

The Warehouse Athletic Facility Presents  
The 14<sup>th</sup> Annual AAU  
SPRING FLING Basketball Tournament  
Saturday, March 26<sup>th</sup> & Sunday, March 27<sup>th</sup>, 2016

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 26<sup>th</sup> and continue through Sunday, March 27<sup>th</sup>, 2016.

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 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked. Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, March 14, 2016.

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 14, 2016 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after March 14, 2016. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

REGISTRATION DEADLINE: MONDAY, MARCH 14, 2016

## Spring Fling 2016 Team Registration Form

Registration Deadline: Received by March 14, 2016

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
 Head Coach 2016 AAU # \_\_\_\_\_  
 Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Saturday, March 26<sup>th</sup> & Sunday, March 27<sup>th</sup>, 2016**

Division (check one):

GIRLS

\_\_\_\_\_ 7<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 8<sup>th</sup> Grade Girls  
 \_\_\_\_\_ 9<sup>th</sup> Grade Girls

BOYS

\_\_\_\_\_ 7<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 8<sup>th</sup> Grade Boys  
 \_\_\_\_\_ 9<sup>th</sup> Grade Boys

All AAU registration numbers will be verified through your local Association.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_  
 Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

SEND REGISTRATIONS AND FEES TO:

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

	<u>Registration Payment</u>
Registration Fee	\$300.00
Total Enclosed	\$ _____

Payment By: \_\_\_ Check \_\_\_ Money Order \_\_\_ VISA \_\_\_ MasterCard

Cardholder's Name \_\_\_\_\_  
 Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Signature \_\_\_\_\_ CVV # \_\_\_\_\_

- This event is licensed 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 web site [www.aausports.org](http://www.aausports.org) to obtain their membership.

# 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:

7. 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.
8. 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.
9. 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

The Warehouse Athletic Facility Presents  
The 12<sup>th</sup> Annual AAU  
**MAY MADNESS**  
Boy's Basketball Tournament  
Friday, May 6<sup>th</sup> -Sunday, May 8<sup>th</sup>, 2016

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

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>, 9<sup>th</sup>, High School Level 1 (Elite teams) & High School Level II (non-elite & community based teams)\*\*

\*\*Please note: Players participating in high school divisions must be 18 years or younger and be currently enrolled in high school.

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 Friday, May 6<sup>th</sup> and continue through Sunday, May 8<sup>th</sup>, 2016.

AAU SANCTIONING: The WAREHOUSE AAU May Madness basketball tournament is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2014 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked . Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, April 25<sup>th</sup>, 2016.

Please send tournament registration form and entry fee to:

The WAREHOUSE

P.O. Box 9786

Spokane, WA 99209

Phone: (509) 484-2670

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 April 25, 2016 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after April 25, 2016. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

REGISTRATION DEADLINE: MONDAY, APRIL 25, 2016

# May Madness 2016 Team Registration Form

Registration Deadline: Received by April 25, 2016

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
 Head Coach 2016 AAU # \_\_\_\_\_  
 Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Friday, May 6<sup>th</sup> – Sunday, May 8<sup>th</sup>, 2016**

Division (check one): **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>      9<sup>th</sup>      HS Level I (Elite)      HS Level II (Non Elite)

All AAU registration numbers will be verified through your local Association. Please provide all information requested.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_  
 Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

SEND REGISTRATIONS AND FEES TO:

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

	<u>Registration Payment</u>
Registration Fee	\$300.00
Total Enclosed	\$ _____

Fax: (509) 484-2669

Payment By:      Check      Money Order      VISA      MasterCard

- This event is licensed 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 web site [www.aausports.org](http://www.aausports.org) to obtain their membership.

Cardholder's Name \_\_\_\_\_  
 Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Signature \_\_\_\_\_ CVV # \_\_\_\_\_

# 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:

10. 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.
11. 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.
12. 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

The Warehouse Athletic Facility Presents  
The 12<sup>th</sup> Annual AAU  
**BELLES SUMMER BLAST-OFF**

Girl's Basketball Tournament  
Friday, May 13<sup>th</sup> - Sunday, May 15<sup>th</sup>, 2016

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

DIVISIONS: 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>, 9<sup>th</sup>, High School Level 1 (Elite teams) & High School Level II (non-elite & community based teams)\*\*

\*\*Please note: Players participating in high school divisions must be 18 years or younger and be currently enrolled in high school.

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 Friday, May 13<sup>th</sup> and continue through Sunday, May 15<sup>th</sup>, 2016.

AAU SANCTIONING: The WAREHOUSE AAU "Belles Summer Blast-Off" basketball tournament is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone: (509) 453-2696. The card fee is not included in registration. All rosters will be checked. Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, May 2, 2016.

**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 Monday, May 2, 2016 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after May 2, 2016. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

**REGISTRATION DEADLINE: MONDAY, MAY 2, 2016**



# Belles Summer Blast-off 2016 Team Registration Form

Registration Deadline: Received by May 2, 2016

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
 Head Coach 2016 AAU # \_\_\_\_\_  
 Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Friday, May 13<sup>th</sup> - Sunday, May 15<sup>th</sup>, 2016**

Division (check one): 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>      9<sup>th</sup>      HS Level I (Elite)      HS Level II (Non Elite)

All AAU registration numbers will be verified through your local Association. Please provide all information requested.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

**SEND REGISTRATIONS AND FEES TO:**

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

	<u>Registration Payment</u>
Registration Fee	\$300.00
Total Enclosed	\$ _____

Payment By:      Check      Money Order      VISA      MasterCard

Cardholder's Name \_\_\_\_\_  
 Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Signature \_\_\_\_\_ CVV # \_\_\_\_\_

- This event is licensed 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 web site [www.aasports.org](http://www.aasports.org) to obtain their membership.

# 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:

13. 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.
14. 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.
15. 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

The Warehouse Athletic Facility Presents  
**On Summer's Edge**  
An AAU Basketball Tournament  
Friday, May 27<sup>th</sup> -Sunday, May 29<sup>th</sup>, 2015

LOCATION: 800 North Hamilton, Spokane, Washington 99202  
(Directly across from Gonzaga University)

DIVISIONS: Boys & Girls- 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup>, High School Level 1 (Elite teams) & High School Level II (non-elite & community based teams)\*\*

\*\*Please note: Players participating in high school divisions must be 18 years or younger and be currently enrolled in high school.

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 Friday, May 27<sup>th</sup> and continue through Sunday, May 29<sup>th</sup>, 2016

AAU SANCTIONING: The WAREHOUSE AAU Summer's Edge basketball tournament is licensed by the Amateur Athletic Union of the U.S., Inc.. All participating players and coaches must have a 2016 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: [www.ieaaau.org](http://www.ieaaau.org) or by phone:(509) 453-2696. The card fee is not included in registration. All rosters will be checked. Individuals without cards will result in team disqualification from the tournament.

REGISTRATION: Team registration form and entry fee, must be submitted by Monday, May 16<sup>th</sup>, 2016.

Please send tournament registration form and entry fee to:

The WAREHOUSE

P.O. Box 9786

Spokane, WA 99209

Phone: (509) 484-2670

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 May 16<sup>th</sup>, 2016 will receive a 75% refund of the tournament entry fee. No refunds will be given for team cancellations made after May 16<sup>th</sup>, 2016. 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 [jared@warehouseathletics.com](mailto:jared@warehouseathletics.com).

**REGISTRATION DEADLINE: MONDAY, MAY 16, 2016**

# On Summer's Edge 2016

## Team Registration Form

Registration Deadline: Received by May 16, 2016

**PLEASE PRINT CLEARLY**

Contact Person: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Head Coach: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Coach/Contact Email Address: (REQUIRED): \_\_\_\_\_  
Head Coach 2016 AAU # \_\_\_\_\_  
Team Name: \_\_\_\_\_ City Representing: \_\_\_\_\_

**Friday, May 27<sup>th</sup> – Sunday, May 29<sup>th</sup>, 2016**

Division (circle one): BOYS GIRLS  
4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> HS Level I (Elite) HS Level II (Non Elite)

All AAU registration numbers will be verified through your local Association. Please provide all information requested.

Player Name	School	2016 AAU #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Assistant Coach: \_\_\_\_\_  
Assistant Coach: \_\_\_\_\_

Teams will be accepted into the tournament on a first come- first served basis. Please note: teams are considered FULLY registered when COMPLETE roster and entry fee have been received.

SEND REGISTRATIONS AND FEES TO:  
The WAREHOUSE  
P.O Box 9786  
Spokane, WA 99209  
Phone: (509) 484-2670  
Fax: (509) 484-2669

	Registration	Payment
Registration Fee		\$300.00
Total Enclosed		\$ _____

Payment By:  Check  Money Order  VISA  MasterCard

Cardholder's Name \_\_\_\_\_  
Account No. \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Signature \_\_\_\_\_ CVV # \_\_\_\_\_

- This event is licensed 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 web site [www.aausports.org](http://www.aausports.org) to obtain their membership.

# AAU Member Club Compliance Form

## CONCUSSION LAW REQUIREMENTS

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This bill requires training and documentation which AAU Member Clubs must adhere to. AAU players and their parents/guardians must meet these minimum requirements:

16. 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.
17. 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.
18. 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