	2005 AAU National Boys' Basketball Super Regional Championship Tournament Information Flyer
	COME QUALIFY FOR NATIONALS !
DATES:	June 17 th – 19 th , 2005
LOCATION:	Prince Georges Country, MD
DIVISIONS OF PLAY:	$10U/4^{\text{th}}$, $11U/5^{\text{th}}$, $12U/6^{\text{th}}$, $14U/8^{\text{th}}$ & $15U/9$ th
TOURNAMENT DIRECTOR/CONTACT:	PK Martin, 240-375-2922 or preston.martin@wamu.net
AGE DETERMING DATE: Excep	September 1, 2005. Exception: See rules at <u>www.aauboysbasketball.org</u> on Grade tions.
ENTRY FEE:	Entry fees for this Super Regional Championship is \$400 . MAKE CAS HIER'S CHECKS OR MONEY ORDERS <i>ONLY</i> ! Forward \$400 entry fee with FORM (A) to host:
	Jay Jackson, 201 Staghorn Ct., Upper Marlboro, MD 20774
	Fax FORM (B) to: AAU Boys' Basketball at 407-934-7242.
ENTRY DEADLINE:	All entries MUS T BE RECEIVED BY JUNE 13 RD , 2005
GAME GUARANTEE:	Each team will receive a 3 game guarantee. Please note; your team's 3 rd game may be in pool play or the first round of bracket play!
RULES OF PLAY:	This event will follow all AAU Boys' Basketball rules as outlined in the 2005 AAU Boys' Basketball Handbook. Go to <u>www.aauboysbasketball.org</u> to obtain a copy! AAUS uper Regional Rule Modifications: (1) minimum recovery time is one game; (2) officials can work a maximum of four games in one day.
PLAYER ROS TER:	ROSTERS MUST BE TURNED INTO THE HOST/TOURNAMENT DIRECTOR PRIOR TO TEAMS FIRST GAME. <u>Please review the 2005 AAU Boys' Basketball Handbook! Roster limitations are</u> <u>found in the Appendix!</u>
AAU MEMBERS HIP:	All athlete's and all four (4) non-athlete's on the bench must hold a current membership in the AAU. Host will check for proof of AAU Membership at registration. Any athlete or coach without acceptable proof of membership will be required to purchase membership at the site to participate.
UNIFORMS : Revised 05/31/05	Teams competing in the AAU National Boys' Basketball Super Regional Championship tournaments must have white and dark jerseys. The visitors shall wear dark jerseys and the home shall wear white.

AWARDS:	AAU medals and trophies will be awarded to the first and second place teams in each age/grade division held.
PLAY STARTS:	Friday, June 17 th , 2005 at 5:00 p.m.
PLAYING VERIFICATION:	Coaches are responsible for Birth Documents and Grade Exception Forms as defined by the AAU Boys Basketball Handbook. You will need to show these documents, upon request, to the designated representative of the National Boys' Basketball Committee. The National Eligibility Committee has sole authority to rule on eligibility.
AUTOMATIC BIDS:	The teams that finish first, second, third or fourth in a Super Regional may receive a bid to the same age/grade division National Championship based upon the following:
	NUMBER OF TEAMS PER AGE DIVISION IN SUPER REGIONAL3-5 Teams- One (1) bid6-8 Teams- Two (2) bids9-24- Three (3) bids25-47- Four (4) bidsTeams that receive an invitation (Bid), from the Super Regional Championship to the National Championship shall participate in their District Championship to validate their automatic bid. If a team receives an invitation (Bid), but is unable to participate in their District Championship, they must submit a written request stating the reason(s) they
CHAMPIONSHIP TEAMS:	IF YOU QUALIFY FOR NATIONALS: 1. GO TO <u>WWW.AAUBOYSBASKETBALL.ORG</u>
	2. CLICK ON " 2005 NATIONAL CHAMPIONSHIP ENTRY PACKETS & HOST INFORMATION" ICON.
HOUSING:	TBD – please contact host for further information regarding housing.
FACILITIES/ LOCATIONS:	TBD – please contact host for further information regarding facilities.

Revised 05/31/05 10:54 PM

ENTRY FORM (A)

2005 AAU National Boys' Basketball Super Regional Championship

DEADLINE FOR ENTRY: JUNE 13RD, 2005

HOSTED BY: MJM CAPITAL EVENTS, INC.

TEAM NAME_____

AAU DISTRICT_____

Circle your age/grade of	livision:							
$8U/2^{nd}$ $9U/3^{rd}$	$10U/4^{th}$	11U/5 th 12U	J/6 th 13U/7 th	$14U/8^{th}$	15U/9 th	16U/10 th	17U/11 th	SR Boys
		C	COACHES INFOR	MATION				
NAME OF HEAD COA								
CITY								
HOME PHONE #		WOR	K PHONE #		(CELL#		
EMAIL ADDRESS			PAGER #					
NAME OF ASSISTAN								
ADDRESS:								
CITY								
HOME PHONE #		WOR	K PHONE #		(CELL#		
EMAIL ADDRESS			PAGER #					
SEND	FORM (A) WITH \$400 F	ENTRY FEE B	Y FEDER	AL EXPR	ESS ONLY	/ TO:	

Jay Jackson 201 Staghorn Ct. Upper Marlboro, MD 20774

I confirm that I have faxed Entry Form (B) to the AAU National Headquarters at 407-934-7242.

Please sign to confirm your fax was sent:_____

ENTRY FORM (B)

2005 AAU National Boys' Basketball **Super Regional Championship**

VERIFICATION OF ENTRY

FAX FORM (B) TO:

AAU Boys' Basketball

407-934-7242

DEADLINE FOR ENTRY: JUNE 13RD, 2005

HOSTED BY: MJM CAPITAL EVENTS, INC.

TEAM NAME_____

AAU ASSOCIATION

Circle your age/grade division:

	h 11U/5 th 12U/6 th 13U/7 th COACHES INFORM		100/10 1	70/11	
AME OF HEAD COACH ·					
	STATE				
IOME PHONE #	WORK PHONE #	C	CELL#		
	BACED #				
MAIL ADDRESS	PAGER #				
	FAGEK #				
NAME OF ASSISTANT COAC					
NAME OF ASSISTANT COAC	CH/CONTACT PERSON :				
NAME OF ASSISTANT COAC ADDRESS:	CH/CONTACT PERSON :	ZIP COE	DE		