### 2006 AAU National Boys' Basketball Super Regional Championship

Tournament Information Flyer

### COME QUALIFY FOR NATIONALS! DIVISION I & DIVISION II

**DATES:** May 12<sup>th</sup>- May 14<sup>th</sup>, 2006

LOCATION: San Francisco, CA

DIVISIONS OF PLAY: 12U/6<sup>th</sup>, 13U/7<sup>th</sup>, 14U/8<sup>th</sup>, 15U/9<sup>th</sup>, 16U/10<sup>th</sup>, & Jr. Boys

TOURNAMENT Matt Williams, Jam on it Basketball Academy DIRECTOR/CONTACT: 775-530-5446, jamonitreno@sbcglobal.net

AGE DETERMING

September 1, 2006. Exception: See rules at www.aauboysbasketball.org on Grade

**DATE:** Exceptions.

**ENTRY FEE:** Entry fees for this Super Regional Championship is \$350.

MAKE CASHIER'S CHECKS OR MONEY ORDERS ONLY!

Forward \$350 entry fee with FORM (A) to host:

Jam on it Basketball Academy: 2803 Pinewood Dr., Sparks, NV 89435

Fax FORM (B) to: AAU Boys' Basketball at 407-934-7242.

ENTRY DEADLINE: All entries MUST BE RECEIVED BY April 28<sup>th</sup>, 2006

GAME GUARANTEE: Each team will receive a 3 game guarantee. Please note; your team's 3<sup>rd</sup> 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 2006 AAU Boys'

Basketball Handbook. Go to www.aauboysbasketball.org to obtain a copy!

**AAU Super Regional Rule Modifications:** (1) minimum recovery time is one game; (2)

officials can work a maximum of four games in one day.

PLAYER ROSTER: ROSTERS MUST BE TURNED INTO THE HOST/TOURNAMENT DIRECTOR

PRIOR TO TEAMS FIRST GAME.

Please review the 2006 AAU Boys' Basketball Handbook! Roster limitations are

found in the Appendix!

**AAU MEMBERSHIP:** 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: 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.

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**AWARDS:** AAU medals and trophies will be awarded to the first and second place teams in each

age/grade division held.

PLAY STARTS: TBA

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 REGIONAL

3-5 Teams — One (1) bid 6-8 Teams — Two (2) bids 9-24 — Three (3) bids 25-47 — Four (4) bids

Teams 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 were unable to participate. The AAU Boys' Basketball Committee will determine if the team is eligible to use their bid.

If a team receives a Super Regional Bid and an District Championship Bid, the team has the choice of determining which bid it shall use to advance to the Division I National Championship. Please note that a District Championship bid will be seeded higher at Nationals than a Super Regional Bid. If the team chooses the District Championship Bid, the Super Regional Bid reverts to the Super Regional and rolls down to the next highest placing team without a bid (not to roll down below 4<sup>th</sup> place).

HOUSING: Please visit <a href="https://www.aauhousing.com">www.aauhousing.com</a> for housing information

FACILITIES/ LOCATIONS: FW Gym Fitness West: 720 Dubuque Ave, South San Francisco

South San Francisco High School: 400 B St, South San Francisco

Sequoia High School: 1201 Brewster Ave, Redwood City

South San Francisco Boys and Girls Club: 201 W. Orange Ave South San

Francisco

# ENTRY FORM (A)

## 2006 AAU National Boys' Basketball Super Regional Championship

DEADLINE FOR ENTRY: April 28th, 2006

HOST	<b>HOSTED BY: Jam on it Basketball Academy</b>					Circle One: Division I				
TEAM NAME_										
AAU DISTRICT	·									
Circle your age/grade o	livision:									
$8U/2^{nd}$ $9U/3^{rd}$	10U/4 <sup>th</sup> 11	1U/5 <sup>th</sup> 12U/6 <sup>th</sup>	$13U/7^{th}$	$14U/8^{th}$	15U/9 <sup>th</sup>	$16U/10^{th}$	17U/11 <sup>th</sup>	SR Boys		
		COAC	HES INFO	RMATION						
NAME OF HEAD COA	ACH :									
ADDRESS:										
CITY		STATE			ZIP CODE					
HOME PHONE #		WORK PHONE #			CELL #					
EMAIL ADDRESS	AIL ADDRESSPAGER #									
					ZIP CODE					
HOME PHONE #					CELL #					
EMAIL ADDRESS		]	PAGER#_							
SEND 1	FORM (A) V	WITH <u>\$350 ENT</u>	TRY FEE	BY <u>FED</u>	ERAL E	XPRESS	ONLY 1	TO:		
		Jam on it Bas Matt William 2803 Pinewoo Sparks, NV 8	s od Dr	cademy						
confirm that I have	faxed Entry	• ′		ational H	eadquart	ers at 407	-934-72	12.		
Please sign to confirr	n your fax w	vas sent:								
	J = 2: - 2322 VV							Page 3		

## ENTRY FORM (B)

### 2006 AAU National Boys' Basketball **Super Regional Championship**

#### **VERIFICATION OF ENTRY**

FAX FORM (B) TO:

### AAU Boys' Basketball

407-934-7242

**DEADLINE FOR ENTRY: April 28th, 2006** 

HOSTED BY	: Jam on it Basketball Academy	Circle One: Division I	Division II
TEAM NAME			
AAU ASSOCIATION			
Circle your age/grade division	:		
$8U/2^{nd} 9U/3^{rd} 10U/4^{t}$	11U/5 <sup>th</sup> 12U/6 <sup>th</sup> 13U/7 <sup>th</sup>	14U/8 <sup>th</sup> 15U/9 <sup>th</sup> 16U/10 <sup>th</sup> 17U/11	th SR Boys
	COACHES INFO	ORMATION	
NAME OF HEAD COACH :_			
CITY	STATE	ZIP CODE	
HOME PHONE #	WORK PHONE #_	CELL #	
EMAIL ADDRESS	PAGER #		
NAME OF ASSISTANT COA	CH/CONTACT PERSON :		
CITY	STATE	ZIP CODE	
HOME PHONE #	WORK PHONE#_	CELL#	
EMAIL ADDRESS	PAGER #		
List the FEDERAL EXPRI	ESS TRACKING NUMBER W	which was used to send your verifica	ntion of ENTRY
FORM (A) to the Hosting (	Organization		
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