ROB MARCHAND
MITCHELL RECREATION CENTER CLASSIC
OFFICIAL 2020 ENTRY FORM
SATURDAY MARCH 7th Boys & Girls Grades 4th – 8th

1. Games will be 18 minute running halves depending on the # of teams in your division. Overtime is 2 minutes for all divisions running clock. Half time will be 5 minutes.
2. Each team will get 2 (1-minute) time outs per half. 1 extra time out in overtime.
3. All teams must have basketball uniforms. Jerseys must be numbered according to official basketball rules.
4. Games Ball: Boys grades 7th & 8th will use a 29.5" ball. **WE DO NOT PROVIDE GAME BALLS**….Each team should bring one.
5. The 3-point line will be in effect. **One team will need to provide an official scorekeeper for each game. We will provide clock.**
6. Technical Fouls: Teams charged with a technical foul will automatically forfeit 2 pts and the other team will gain possession of the ball.
7. No press after a 15 point lead in the 6th grade and up. No press at any time in the 4th & 5th grade divisions.
8. MAN TO MAN DEFENSE ONLY. YOU CAN ONLY PLAY A ZONE PRESS UP UNTIL HALF COURT THEN GO BACK TO MAN TO MAN.
9. All other High School rules apply.
10. You must bring your own basketballs for warm ups. One team's ball will be chosen for the game ball.
11. You must provide your own first aid kits.
12. Players may play up in the grade brackets, but not down. A player caught playing down will cause their team to forfeit all games and will lose all entry fees.
13. Game times and tourney brackets will be emailed to you on the Monday before the tournament. If you do have email access we will call you with the game times.

DEADLINE WILL BE WEDNESDAY, FEBRUARY 26th OR UNTIL DIVISIONS ARE FULL! Should a division fill before the deadline, we will hold your entry form and place your team on a waiting list. If an opening should occur we will contact you.
ENTRY FEE: $125 PER TEAM – Make check payable to the Mitchell Recreation Center **3 GAME GUARANTEE**

Team Name_____ **Coach**_____ **School**_____
Address_____ **City/State/Zip**_____
Home Phone_____ **Work Phone**_____ **Cell**_____

Email Address-*PRINT CLEARLY*_____

Please check Boys_____ **Girls**_____
Grade Level: 4th_____ **5th** _____ **6th**_____ **7TH** _____ **8TH**_____

Please rank your team: Circle one 1 2 3 4 5 6 7 8 9 10 (1 being advanced-10 being recreational)

I, the undersigned, release the Mitchell Recreation, Dakota Wesleyan, Harve's Sport Shop, its officers and committee members, volunteers and officials, the city of Mitchell and Mitchell Public School District from any and all liability for any injury or loss sustained by any player while playing, practicing, traveling, and participating in the Mitchell Recreation Center/Harve's Sport Shop/DWU Classic. The signing of this player-parent Liability Waiver Agreement shall be considered as a waiver of any claim for any such injury or loss. If my child is injured and requires medical care, I consent to such care. All players and parents/guardians (if player is under 18 years old) must sign this waiver form in order to be eligible in this tournament.

Team Roster

PLAYER NAME	GRADE	PARENT SIGNATURE	PLAYER NAME	GRADE	PARENT SIGNATURE
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

MAIL ENTRIES TO

Mitchell Recreation Center Attn: Kevin

1300 North Main Mitchell, SD 57301