



SNOWBALL SHOOTOUT

2020 – Snowball Shoot-Out REGISTRATION ENTRY FORM

Sponsor: Assumption Varsity teams, Future Lady Knights and Knights Basketball Assoc
Divisions: **Boys or Girls team by grade level:** 3rd 4th 5th 6th 7th 8th grade teams

Dates: **December 29, 2020 for girls. December 30, 2020 for boys**
Courts at: Assumption High School 102 West Central Park , Davenport, Iowa 52804
or other local gym locations

Games: 3 Game Guarantee. 2 Certified Refs for each game.

Team Fee: **\$165.00 Early Bird Registration Fee** (by 12/10/20). \$180/team after 12/10/20
Pay by check only. Checks must be sent to us with the Registration form
Check payable to “Snowball Shoot Out” DO NOT SEND CASH.

Deadline: December 20, 2020 or until the division is full
Mail Entry & Fee to: c/o Dave King at 2205 Kimberly, Unit 317, Bettendorf Iowa 52723

Name of Team: _____ **School District:** _____

Grade: Boys () Girls () **Grade level:** 3rd () 4th () 5th () 6th () 7th () 8th ()
Rate the level of the team’s experience (School team)... 1.....2.....3....4.....5 (competitive traveling team)

Head Coach: Name: _____
Address: _____
City, State, Zip: _____
Phone: Home () _____ Work () _____ Cell: _____
e-mail: _____ **(PLEASE PRINT).**

Asst. Coach or Parent Contact: Name: _____
Address: _____
Phone: Home () _____ Work () _____ Cell: _____
e-mail: _____ **(Please Print)**

Check List: Entry Fee must be enclosed
Roster/ Waiver must be mailed with registration or brought to the tourney prior to the first game.
Any special requests: _____

Coach’s Signature _____ **Date** _____

2020 – Snowball Shoot-Out KEY SUMMARY OF RULES

- **The Iowa federation rules will apply except as modified herein. The following are a summary of the some of the important rule changes, modified as stated below. Please know the Iowa rules for bench conduct. You must stay on the bench except for circumstances permitted by the rules. Separate sheet for rules may be provided at each score table.**
 - **18 minute half with continuous clock , except in the last 2 minutes of the game. Clock stops per regular rules in the last 2 minutes of the game. There will be up to a 5 minute pre-game warm up . Up to 5 minute for half time.**
 - **3 time-outs per game (30 seconds per TO). All technical and intentional foul will result in 2 points & possession of the ball for the opposing team. Flagrant swing of the elbows is a technical foul.**
 - **Free throws per half: 1 and 1 on the 7th team foul. 2 FT on the 10th team foul**
 - **The 3rd thru 5th grade only: No press in backcourt, except in the last 2minutes of the 2nd half. No team will be allowed to press in the backcourt after accumulating a 20-point lead.**
 - **Overtime will be a 2-minute period, and each team will receive one additional time-out. Second overtime will be sudden death (any score , by shot or free throw will win).**
 - **Equipment: Boys & girls teams will use (Iowa) IHSAA Official girl’s size basketballs. Bring your own basketball balls. Bring both light and dark numbered uniforms, or reversible uniforms. The team list first (or on the top) of the bracket will be the home and wear light uniform and provide the game ball**
 - **Scorekeeper: Each team must provide one adult official scorer/clock.**
 - **Players: Roster & Waiver must be completed, signed (by Parent and player) and turned into the tourney director when the head coach checks in, no later than 1 hour before the team’s first game. No change in roster allowed after the roster is turned in. The player is not eligible to play without it. A player can play on only one team in the tourney. A player or team can play up, but not down in a division.**
 - **Facilities: Locker rooms are not available. Restrooms are available.**
 - **Admission few - Spectators: All players and two coaches (on the registration) will be admitted free, if they wear their uniform. General admission \$6.00 / adult , \$5.00/ seniors & students, \$4.00/ grade school student. Children under 4 year are free.**
 - **Concessions: Hot & cold food and beverages are provided. No coolers are allowed.**
- Any bad or abusive language or poor sportsmanship from coaches, players or fans will not be tolerated. They will be asked to leave. No refunds will be given. Please remember – we are all here for the skill development of our players.**



SNOWBALL SHOOTOUT

INVITE YOU TO THE 23th ANNUAL
SNOWBALL SHOOT OUT 2020
Tuesday Dec. 29, 2020 for Boy teams
Wednesday Dec. 30, 2020 for Girl teams

3rd THROUGH 8TH GRADE BOYS AND GIRLS
Games at Assumption High School, Davenport, Iowa or alternate gym location

**Early Bird Fee: \$165 per team. Regular Fee \$180 (after
12/10/20). Deadline Dec. 20, 2020**

Make check payable to: Snowball Shootout
GUARANTEE MINIMUM OF 3 GAMES

Certified referees at each game.

SEND ENTRY TO: SNOWBALL SHOOT-OUT
c/o Dave King 2205 Kimberly Rd., Bettendorf Iowa 52722

Questions may be directed to:
David King : kingchief7@yahoo.com or call 563-370-8776

Only paid entries will be scheduled.

Entry deadline forms and fee need to be received by DEC. 20,2020.

Forms are on our web site. www.snowballshootout.com

2020 – Snowball Shoot-Out Roster/Waiver Information

PERMISSION: The undersigned, as a player (if 18 years old, and I, as parent or legal guardian of the player, permit the player to participate in all activities of the Snowball Shootout tourney, including playing basketball games and to participate with/against other players in the tourney and against other teams in the players own grade/age group, and older or other grade/age groups, and to watch other games, and participate in all activities. I/We represent that the Player is of good physical and mental condition and has proper ability to adequately participate safely in all competitive athletic activities, including competitive games. If the player's physical/mental condition changes such that the Player should not so participate, I will promptly notify the Snowball Shootout tourney director and the coach of the players team. I/We understand that activities and events in the programs and competition involve various risks of injury or loss. I/we and the player do accept or assume all of the risks of injury and otherwise, however same may be caused, to the player, and will indemnify Augustana College, Assumption High School, Beyond the Baseline, the Snowball Shootout club, the Knights Basketball Association (KBA), and Future Lady Knights Inc (FLK) and their respective volunteers, coaches, employees and board therefrom.

RELEASE and INDEMNITY: I/We release, discharge, and agree to defend, hold harmless & indemnify, Augustana College, Assumption High School, the Snowball Shootout club, the KBA and FLK and their respective volunteers, coaches, employees and board members, and the sponsors of the tournament and the owners of facilities in which the player plays from any/all claims, causes of action and possible liability for personal, mental, physical or bodily injury, damage, harm or loss suffered by the player of the parents thereof or suffered by others because of, and which now exists, and/or hereinafter arises from all or any cause or claim, including that which is alleged to be caused, in whole or in part, by the negligence, failure, fault, omission, acts, statements or otherwise of Augustana College, Assumption High School, the Snowball Shootout club, the KBA, and FLK Inc and their respective volunteers, coaches, employees and board. This is a continuing indemnity and release of all existing & future claims that may hereinafter arise, whether known or not, including that which involves a cost, injury or damage that is not now known. This agreement is binding on us, the player and each of our respective heirs, executors and administrators.

Permission To Treat: I/We further hereby consent & authorize all Snowball Shootout volunteers to give or obtain any/all emergency medical treatment, if the player is injured. I/We understand that any/all medical costs for this player are my responsibility only, and not that of Assumption, KBA, FLK, or its coaches or board members. I represent to all concerned that I have health insurance for the player and that I will fully pay for all cost of care and treatment incurred for/by the player.

Team Name: _____ **Boys () Girls ()** Grade **3rd () 4th () 5th () 6th () 7th () 8th ()**

Player Name	Light #	Dark#	Parents Signature
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I certify that the above information is correct and signed by the proper person

Coach Signature _____ **Date** _____

(If additional space is needed, please use reverse side)

