

2014 POTOMAC VALLEY REGISTRATION CHECK LIST

Please double check to make certain that the following documents have been completed as indicated:

- **Registration Checklist:**
All items have all been checked off and you have ensured that each is complete in its entirety. You MUST complete your Team Roster online (aauboybasketball.org) and then submit that roster along with the PVA AU roster. Each individual Player Entry Form must be completely filled out. Please attach all waivers to the player profile sheet. **PLEASE KEEP TWO COPIES OF YOUR REGISTRATION DOCUMENTS. PLACE ONE TEAM COPY IN A BINDER TO BE PRESENTED ON REQUEST**
Team Entry Form:
All contact information must be completely filled in including alternate names, phone numbers and e-mail addresses.
 - **Team Roster:**
Please indicate in the applicable column (Yes or no) waiver or cross-boundary athlete. The head coach, not the team manager/ parent, must sign to certify that the information is correct. All coaches must complete the PCA Coaches Certification.
 - **Valid ID Badges:** If you have a valid ID Badge for a player or Coach who participated in the, 12, 13 Regional qualifiers you will only need to submit the ID card, Waiver Form and Individual Entry Form for that player. If a player or coach participated with another team last year you may use the badge of the previous team provided the players ID have eligibility. If the club does not have a valid ID badge for a player or coach they must register with the coach to obtain a badge.
 - **Individual Entry Form:**
Master form included, makes copies as needed. Athletes should sign only where indicated (at ATHELTE'S SIGNATURE line). Athlete SHOULD NOT sign in the Tournament Use Only section.
 - **Birth certificate or Passport and Report card needed to certify Grade:**
No hospital certificates will be accepted. The birth certificate must be of good copy quality and cannot be altered or damaged. If the document is questionable, an original birth certificate will be required. Please staple the Birth Certificate record to the individual entry form for each respective player. This year we will need a copy of the report card. For home schooled players, a declaration of grade will be required. **a confirmation of grade level from a school administrator (guidance counselor, principal, dean etc.) on school letterhead with signature and contact number is required.**
- Protest:**
If a Protest is filed at any point during the District Qualifiers, an original Birth Certificate or passport and current year school report card may be required to confirm player's age and or grade status. All protest should be filed prior to the completion of Pool Play. Any Protest filed during the District Qualifiers will be turned over to the PVA AU Boys Basketball Review Committee. Any emergency hearing will be held by a quorum of the Boys Basketball Review Committee. Any protest filed after pool play may not stop the progress of the event and may be settled after the event.
- **Photos**
Attach as indicated on the individual entry form
 - **Athlete Waiver/Release Form**
Athlete waiver and release form must be completed for each athlete. Signature by the athlete and Parent/guardian required. Staple athlete waiver/release form to individual entry form behind the copy of the birth certificate (or passport) for each player.
 - **Tournament entry Fee**
Division I, Division II and Division III District Tournament entry fees are **\$450.00** each. Make checks payable to PVA AU-Boys Basketball; certified check, business check or money orders only. No personal checks will be accepted. If you plan to participate in the Division I and Division II tournament, the fee for the second event will be **\$300.00** if paid during the initial registration, if paid separately the fee will be **\$350.00**. If you pay the Division II fee in advance and then Medal in the Division I event. Your entry fee will be returned. **All entry packages will be subject to final inspection and review.** The PVA AU Boys Basketball Committee reserves the right to request an original Birth Certificate for any player during the registration process.
- Exception Players**
Please see page 8 for eligibility requirements. All Exception players must submit original birth certificate and report card. They must also present themselves during registration.

PVA AU GAMES MAY BE STREAMED, BROADCAST OR RECORDED THIS YEAR. PLEASE MAKE SURE YOUR PARENTS AND SUPPORTERS ARE AWARE OF THIS. ALL COACHES MUST COMPLETE THE PCA COACHES CLASS AT WWW.AAUSPORTS.ORG.

Once you have put your registration package together as instructed, please enclose information in a large 9x12 envelope. The Registration checklist should be taped or stapled to the front of the sealed envelope. This is the package to be presented at the in-person Registration. You must turn in your packet at one of the scheduled registration dates. Package must be received by the last day of registration for the applicable age group: Any request for an extension to the registration deadline must be approved by Melody Britt or P. K. Martin.

If the contents of your package are completed properly and all is in order, the registration process will move quickly.

INCOMPLETE REGISTRATION PACKAGES WILL BE SUBJECT TO A 10.00 LATE FEE PER ITEM. LATE REGISTRATIONS AFTER DEADLINE CAN ONLY BE APPROVED BY MELODY BRITT, TOURNAMENT DIRECTOR OR THE DISTRICT SPORTS CHAIR, MR. P. K. MARTIN 240-375-2922

DATES OF THE 2014 DISTRICT QUALIFIERS

MARCH 28 – 29 – 30 D1 ARIL 4 – 5 – 6 D2 Discovery Sports Center - 8031 Central Park Cir, Boyd's, MD 20841

MAY 2 – 3 – 4 D3 MAY 10 & 11 High School Division LOCATIONS TO BE DETERMINED for D3 & HS

Any team that brings a new Organization to the 2014 registration will receive a \$50.00 discount for each organization. If a team brings/refers 10 New Organizations teams, they will receive free registration for a team in 2014.

THE FINAL REGISTRATION IS THE LATE REGISTRATION. A \$10.00 FEE WILL BE ASSESSED PER ITEM.

Coaches Meeting: February 17, 2014 at Forestville HS at 7:00 pm

REGISTRATION:

Location: Forestville HS - 7001 Beltz Dr, Forestville, MD 20747

Dates: MARCH 1, 2, 8, & 9 Time: 10 – 3 pm Sat 11-3PM Sun

LATE REGISTRATION - MARCH 15TH (Late fees will apply) Time: 10 – 3 pm

Draw March 19 (D1 & D2) Time: 7:00 pm

PLEASE BE ADVISED THAT PVAAU DISTRICT QUALIFIERS MAY BE BROADCAST, FILMED, STREAMED LIVE AND OR RECORDED.

ALL COACHES WILL BE REQUIRED TO COMPLETE THE PCA COACHING CLASS CERTIFICATION AND INCLUDE THIS IN THE TEAMS REGISTRATION PACKAGE.

It is the intent of the Potomac Valley District to help as many teams as possible to attend the AAU National Championships. If your team will be attending a Super Regional prior to the District Championships, please advise the Boys Basketball Committee so we can track your progress and record your finish. If your team has a bid from the 2013 National Championships, please be aware that your teams must still attend the 2014 District Qualifiers to use the bid. If your team earns a bid in the District Qualifiers, you should register for the National Championships using the earned bid from the PVAAU District Qualifiers. The District bid will be higher than the bid from 2013. If your Organization sent 5 or more teams to the National Championships in 2013, please contact Melody Britt to determine if additional bids can be allocated for your club.

The Potomac Valley District is looking to support Organizations that want to host Basketball Training Academies in 2014 and 2015. These Academies can be used as fund raisers while helping to build the PVAAU Membership base. Please contact P. K. Martin for additional information.

The PVAAU Boys Basketball Committee has agreed to hold 3x3 Basketball events in support of USA Basketball, FIBA and Hoop It Up's effort to have 3x3 Basketball added as an Olympic Sport by 2020. Any Organization willing to assist in this effort should Contact Melody or P. K. for additional information.

POTOMAC VALLEY DISTRICT
AMATEUR ATHLETIC UNION
2014 REGISTRATION INSTRUCTIONS

- _____ TEAM ENTRY FORM
- _____ TEAM ROSTER **must be printed off the AAU website**
- _____ INDIVIDUAL ENTRY FORM – 1 per player **must submit photo on form**
- _____ BIRTH CERTIFICATE OR PASSPORT AND REPORT CARD
Stapled to individual entry form for respective player
- _____ ID Badge for Players – **will take ID photo's or submit ID cards. Pictures on flash/UB drives will need to have players' names and date of birth.**
- _____ ATHLETE WAIVER/RELEASE FORM
Must be signed by player and parent
- _____ WAIVER EXCEPTION NOTICE, IF NECESSARY
Please use guide on last page, if player fall into this category, please provide ORIGINAL documents. Player must be in attendance at registration.
- _____ TOURNAMENT ENTRY FEE's—Division I, Division II and Division III - \$450; in Cash, certified check, business check or money order. **NO personal checks.**
- _____ Team Check off form – **Complete top of page and players names only**

If you plan to participate in the Division I and Division II tournament, the fee for the second event will be \$300.00 **if paid during the initial registration, if paid separately the fee will be \$350.00.** If you pay the Division II fee in advance and then Medal in the Division I event. Your entry fee will be returned.

Potomac Valley District Amateur Athletic Union 2014 team Entry Form

Complete All Areas **Before** Submitting

Team/Club Name: _____ DIV _____ Coach: _____ GRADE:

1ST 2ND 3RD 4TH 5TH 6TH 7TH 8TH 9TH 10TH 11TH 12TH

Coaches/Contact Information

Must have alternate names & Phone Numbers other than Head Coach

Head Coach	AAU membership #	Assistant Coach	AAU Membership #
Address		Address	
City, State, Zip		City, State, Zip	
Home Phone	Work Phone	Home Phone	Work Phone
Email Address		Email Address	
Cell Phone #		Cell Phone #	

Assistant Coach	AAU membership #	Assistant Coach	AAU Membership #
Address		Address	
City, State, Zip		City, State, Zip	
Home Phone	Work Phone	Home Phone	Work Phone
Email Address		Email Address	
Cell Phone #		Cell Phone #	

PLEASE USE ALL 4 BOXES. IF YOUR TEAM WON'T HAVE A FULL COMPLIMENT OF COACHES, THEN ASSIGN THAT POSITION TO A PARENT WHO WILL ACCOMPANY THE TEAM TO THE NATIONAL. THAT PARENT WILL NEED AN AAU MEMBERSHIP.

POTOMAC VALLEY DISTRICT

AMATEUR ATHLETIC UNION 2014 INDIVIDUAL ENTRY FORM

ATTACH
CURRENT
PHOTO HERE

- Complete all areas and provide all requested information.
- Failure to complete all areas of this form will cause your PLAYER's entry to be rejected.
- Be sure to have the parent or guardian sign and date the Athlete Waiver/release Form and Agreement to participate
- Attach completed form, a copy of birth certificate, and current photo.

Team/Club Name: _____

Athlete's name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Home #: _____

Date of Birth: _____ Age: _____ AAU Number _____
(Mo/Day/year)

Grade : _____ Height: _____ Weight: _____

School attended: _____ City/State of School: _____

Mother's Name: _____ Cell: _____

Father's Name: _____ Cell: _____

Guardian's Name: _____ Cell: _____

Mother/Father or Guardian's E-mail Address: _____

ATHLETE'S SIGNATURE: _____

TOURNAMENT USE ONLY

ATHLETE'S SIGNATURE UPON CHECK-IN

DO NOT SIGN BEFORE REGISTRATION

ATHLETE WAIVER/RELEASE FORM ("AGREEMENT")

IN CONSIDERATION of my/ the minor's participation in any way in an Amateur Athletic Union of the U.S., inc., activity ("ACTIVITY") I, for myself, the minor, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree and represent that I understand the nature of Activity and that I am/ the minor is qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I/the minor will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that: (a) ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own/the minor's actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur/the minor incurs as a result of my/the minor's participation in the Activity. 3. HEREBY RELEASE, AND FOREVER DISCHARGE, AND COVENANT NOT TO SUE the Amateur Athletic Union of the U.S. Inc. ("AAU"), the Potomac Valley Association of the AAU and the municipalities in which any such activity is conducted, their parent, related, affiliated and subsidiary companies, as well as the officers, directors, agents, employees, representatives, successors and assigns of the foregoing entities, and the AAU's Associations, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by the AAU (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES OR DAMAGES ON MY/THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION OR NEGLIGENCE OF THE "RELEASEES: OR OTHERWISE, INCLUDING, BUT NOT LIMITED TO NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on RELEASEES from any litigation expense, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. This Agreement shall be governed by the laws of the State of Florida, through AAU Arbitration or other Arbiter approved by RELEASEES, and subject to the Rules of AAU or the applicable Arbiter, and applicable Florida law.

Agreement to Participate

I, or we, grant to the Directors, Assistants, or assigned chaperones of the Potomac Valley AAU event to act as guardian/spokesman in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for the minor in route to or from or at the site of the AAU event or hospital or other medical facility. I understand that should a health emergency arise, such parties will attempt to notify me, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized.

I hereby authorize the AAU to allow the reproduction, dissemination, and/or publication of my/the minor's name and/or likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my/the minor's participation in the AAU event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my/the minor's participation in the event, nor will I/the minor receive any payment for the possible commercial use of my/the minor's name or likeness. INSURANCE; AAU membership provides excess medical insurance for any member athlete participating in an AAU-sanctioned practice or event. If such athlete has other medical coverage, theirs will be applied first, followed by AAU insurance. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL, RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OR PARTICIPANT: _____ PHONE: _____

PARTICIPANT'S SIGNATURE (only if age 18 or over) _____ DATE: _____

TEAM NAME: _____ DATE OF BIRTH _____ GRADE _____

MINOR RELEASE: AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY-AS IS, WITHOUT MODIFICATION OR ACCOMMODATION. I HEREBY RELEASE, FOREVER DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION AND/OR NEGLIGENCE OF THE "RELEASEES: OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF LITIGATION AND/OR ARBITRATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGES, OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____

PARENTS, please understand that you are certifying that your child is of the correct age and grade. If your child is found to be illegal for this age group, he may lose his rights of membership in the AAU.

Potomac Valley District

Amateur Athletic Union

2013 Registration Check off form

Team _____ Grade _____

Division 1 _____ Division 2 _____ Division 3 _____ HS _____

Payment: CK# _____ MO# _____ Cash _____

Online Rooster (AAU Website): Yes _____ No _____

Fill in players name only below

PLAYERS

Name	AAU #	Athlete Waiver	Entry form	Birth Cert	Report Card	Photo ID	Exception Original Doc.	
							BC	RC

COACHES

NAME	AAU#	ID PHOTO	PCA	CONTACT INFO	
				Cell	email

PACKAGE COMPLETE _____ DATE _____

Reviewer _____ Coaches Signature _____