



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

785.825.2151  
570 YMCA Drive  
Salina, Kansas 67401  
www.salinaymca.org

# WHO'S GOT GAME

## 3v3 Adult Basketball Tournament SALINA FAMILY YMCA

**DECEMBER 1 - 2, 2018**

**\$50 PER TEAM**

- Check In** 7:30 AM
- Tournament Start** 8:00 AM (If needed, games will resume Sunday, December 2 at 10:00 AM)
- Registration Deadline** November 16 (Brackets will be emailed to the team captain)
- Mail entries to or drop off at the Y** Salina Family YMCA  
Attn: Bev Jones  
570 YMCA Dr., Salina, KS 67401
- Checks payable to** [Salina GemStars Booster Club](#)
- Game play**
  - Maximum 5 players per team (18+ or older)
  - 15 minutes games
  - Double elimination
  - No referees - games called by players
  - ½ courts (4 games will run at a time)
  - 1<sup>st</sup> team to 15 pts wins OR whoever is winning at the end of the regulation.
  - Any game ending in a tie will go into sudden death where the next point wins.
  - \*Prizes will be awarded to the 1<sup>st</sup> place winning team.



### HOSTED BY THE SALINA GEMSTARS

This tournament is a fundraiser for the Salina GemStars gymnastics team. This is a travel and competitive team that consists of 65 girls ranging from ages 5-16 years. The GemStars have the opportunity to attend the AAU National Championships in June at Disney World. The proceeds from this tournament will help with travel accommodations for team members that qualify to be a part of our National team. With the support of this tournament our National team will create memories that will last a lifetime.

### INFORMED CONSENT AGREEMENT

I HEREBY CERTIFY THAT MY TEAM IS IN NORMAL HEALTH AND CAPABLE OF SAFE PARTICIPATION IN THIS 3v3 TOURNAMENT. I/ WE ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO THE CONDUCT OF THIS PROGRAM. I SUPPORT THE YMCA PHILOSOPHY WHICH IS BASED ON PARTICIPATION, FUN, PHYSICAL FITNESS, HEALTH, SKILL DEVELOPMENT, TEAMWORK, FAIR PLAY, FAMILY INVOLVEMENT, AND VOLUNTEER LEADERSHIP. THIS AGREEMENT MUST BE SIGNED TO PARTICIPATE IN THIS PROGRAM. OUR PLAYERS UNDERSTAND THAT EVERYONE MUST SIGN THIS INFORMED CONSENT AGREEMENT FOR THE TEAM AS A WHOLE. WE GIVE PERMISSION TO THE SALINA FAMILY YMCA TO USE WITHOUT LIMITATION OR OBLIGATION, PHOTOGRAPHS, FILM FOOTAGE, OR TAPE RECORDINGS WHICH MAY INCLUDE ME OR MY TEAM'S IMAGE OR VOICE FOR THE PURPOSE OF PROMOTION OR INTERPRETING YMCA PROGRAMS. THIS AGREEMENT MUST BE SIGNED TO PARTICIPATE IN THIS PROGRAM.

### TEAM CAPTAIN INFORMATION

1 \_\_\_\_\_

LEGAL NAME	TEAM NAME	DATE
EMAIL	DOB	
PHONE	SIGNATURE	

### TEAM ROSTER INFORMATION

LEGAL NAME	SIGNATURE	DOB
2 _____		
3 _____		
4 _____		
5 _____		