

AMBRIDGE HOSTS ANNUAL 2016
7th & 8th Grade Boys
TIP-OFF BASKETBALL TOURNAMENT

December 16th (Friday) thru December 18th (Sunday)

Dear Coach/Director:

You are cordially invited to enter your team in the Ambridge Tip-Off Basketball Tournament to be held at Ambridge Area School District.

The Tournament format will consist of the following:

- Games will be played at Ambridge High School – Field House and HS GYM
- **Entry Fee: \$200 per team**
- **Three** game guarantee
- PIAA referees and rules
- Games will be two (2) sixteen-minute halves. The clock will stop the last minute of each half and during foul shots. There will be two full time outs and one 20-second timeout per game and 5 personal fouls per player. Three Timeouts per game, two maximum per half (1 minute each)
- No full court press once a team is leading by fifteen (15) points
- Forfeit time will be fifteen (15) minutes after scheduled game time
- Pre-Game warm-up will be five (5) minutes in duration
- Half-time will be five (5) minutes in duration
- Overtime will be two (2) minutes in duration
- One Timeout Awarded if game goes into Over Time
- Players/Coaches receiving two technical fouls during any one game will be ejected for the remainder of that game and will not be eligible to participate in the next scheduled game
- Inappropriate behavior will not be tolerated and may be cause for a team's disqualification from the tournament. This will be at the tournament director or co-director's discretion.

In closing, to enter your team in the Ambridge Annual Tip-Off Basketball Tournament Please return attached registration form along with your entry fee to:

AMBRIDGE BASKETBALL

c/o Nikki Santiago
288 McNair Street
Baden, PA 15005

Email address: nikkisantiago18@yahoo.com

Coaches, this is an opportunity for all the teams to meet before the season starts and take a look at all the teams. We are looking forward to hosting a highly competitive, fun, pre-season tournament for all area teams. Please call should any questions/concerns arise at (724) 561-9991

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REGISTRATION FORM

TEAM NAME: _____

GRADE: _____

COACH'S NAME: _____

EVENING PHONE: _____

CELL PHONE: _____

EMAIL ADDRESS: _____

Please return your registration form and entry fee to:

Nikki Santiago
288 McNair Street
Baden, PA 15005

NOTE: Checks should be made payable to: **Ambridge Basketball**

I hereby acknowledge that all members of this team have health and/or accident insurance to cover any and all injuries that may be sustained at the 2016 Ambridge Tip-Off Basketball Tournament. I agree that all members of the team I coach in the Ambridge Tip-Off Tournament are in good health and medically clear to participate in basketball prior to playing in the tournament. In the event of injury, we will not hold Ambridge School District or the Ambridge Girls' Basketball Boosters Association responsible.

Signature: _____ **Date:** _____

DEADLINE FOR ENTRY IS DECEMBER 9th