### **Quarry Days**

#### Top of the

Rock 3-on-3

## Basketball Tournament Tournament Sign-Up Sheet

What: A fun 3-on-3 basketball tournament

Where: City Park Basketball Courts

When: Saturday June 25<sup>th</sup>: Begins at 11:00am

Team Name:		
Team Captain:	Team Captain Phone #:	
Team Captain Address:	Team Captain Email:	
		<b>)</b>
Team Members: (Up to 5 players)		Å
1	4	N
2	5	
3		<b>7</b> 7
Age and Division Desired:		2
7 <sup>th</sup> and 8 <sup>th</sup> Boys	7 <sup>th</sup> and 8 <sup>th</sup> Girls	
High School Boys	High School Girls	
Men's Open		
(Mixed Gender Teams are Welcome	e)	

Please return this Sign-up Sheet, Release Forms, and the \$25 tournament fee to P.O. Box 81, Dell Rapids SD, 57022 by *Monday, June 20, 2015.* Schedules and tournament information will be e-mailed to the Team Captains by Wednesday, June 24, 2015. Team captains are responsible to inform their team of schedule and rules.

### **Tournament Rules:**

- 22 minute running clock time limit per game.
- Baskets are 1 point; baskets beyond the 3 point line are two points.
- Games will be played to 15 points, win by 2, up to a maximum of 20 points.
  - o Or, the team ahead at the time limit
- Referees will call fouls
- Foul shots will be taken after the 7<sup>th</sup> foul
  - o Free throw line; 1 point
  - o 3 point line: 2 points
- Take ball back behind 3 point line on every change of possession.
  - Every dead ball (jump balls included) will be checked-in from beyond the 3 point line. Ball must be passed in.
- Unsportsmanlike behavior will NOT be tolerated.

# Dell Rapids Top of the Rock 3-on-3 Basketball Tournament Player Release of Liability Form

Team Captain:\_\_\_\_\_

Team Name:\_\_\_\_\_

Player Full Name:			
Gender: Female	Male	Date of Birth:	Age:
Contact Number:		<b>Tournament (</b> <i>Check One</i> <b>):</b> Adult_	7 <sup>th</sup> -12 <sup>th</sup>
Basketball Tournament, property damage which incident thereto. This reemployees, game official that liability may arise or ecreational activities, it death, and knowing the sue or exercise any legal discharge all claims for or any equipment therefore any legal that this Wit will apply to the tourn	, I hereby waive n my occur as a elease discharge als and referee out of the CITY' ncluding baske ose risks, I freely al right to seek of personal injury eon including he VAIVER< RELEA nament.	OF RISK: In consideration of my participation in e, release and discharge all claims for damages result of my participation in the basketball too es in advance the City of Dell Rapids, its officers (hereinafter referred to collectively as "CITY" S active or passive negligence or carelessness. tball, involve an element of risk or danger of a y and voluntarily assume the risk of injury and, damages from CITY. By this agreement, I also it, death or property damage caused by the concops, backboards, net, balls.  SE and ASSUMPTION OF RISK form will remain	s for death, personal injury, ournament or any activity rs, agents, servants, and r) from liability even though I acknowledge that come coidents, injury and even for death and I promise not to the name of the basketball court on file with the CITY and the
the risk of hazard to my	health. In add	on that would cause participation in the basked ition, I authorize the CITY to provide or cause to opropriate if I am injured while participating in	to be provided such medical
		& Regulations of the Top of the Rock 3-on-3 Bathat failure to abide by them may result in my	
Player Name (printo	ed <b>):</b>		
Player Signature: _			Date:
Required for player	s less than 1	18 years of age (Please Check):	
Parent/Legal Guard	lian Name ( $ ho$	printed <b>):</b>	
Parent/Legal Guard	lian Signatur	re:	Date: