Winter 2009-2010

TO: Head Basketball Coaches

FR: MSF Offices

RE: Boys State Tournament Packet/Schedules

We hope this note finds you enjoying the basketball season. We look forward to once again hosting top youth basketball teams from across Minnesota.

To assist you in making your tournament plans, we have enclosed a list of area hotels and a map to your tournament site.

Please carefully review the following information:

- 1) The tournament schedule will be posted on our web site 7-9 days prior to the tournament at www.msf1.org.
- 2) The official state championship roster/waiver form is enclosed and also printed in the MSF Youth Basketball Guidebook. If you have not already done so, the roster needs to be completed and sent to the MSF Offices or handed in at the seeding meeting.
- 3) All players appearing on your official tournament roster must verify their AGE or GRADE (see rules and regulations for a list of acceptable documents)
- 4) Seeding Meetings will be held either February 15th or 16th. Please fill out your team history found on page 9 in the guidebook (also enclosed), and bring to the seeding meeting. All seeding meetings are at the Country Suites in Coon Rapids in the Hickory Oak Room at the following times:

Monday, February 15 th	Tuesday, February 16 th
5 th Grade Boys @ 6:30 PM	7 th Grade Boys @ 6:30 PM
9 th Grade Boys @ 7:30 PM	8 th Grade Boys @ 8:00 PM
6 th Grade Boys @ 8:30 PM	

The documents in this packet also appear on our web site. The basketball guidebook can also be found on our web site. Should any questions arise, please contact Steve (x12) at the MSF Offices at 763-263-9993, or email at steve@msf1.org. Please do not wait until the last minute to prepare your team's roster and documents.

Good luck!

Steve Ketter

Program Administrator

Enclosures:

- Cover Letter
- Map to tournament site
- Map to seeding meeting site
- Tournament roster
- Team history form





MINNESOTA
SPORTS FEDERATION

CORPORATE PARTNERS





AFFILIATED WITH USA Broomball National Sports Federation

The Amateur Softball Association ◆ USA Softball is recognized by the United States Olympic Committee as the National Governing Body for Softball.

Winter 2009-2010

Dear Youth Basketball Coach:

Congratulations on being accepted for the 22nd Annual Minnesota Sports Federation Basketball 9th Grade Boys State Championships to be held in New Brighton on March 5-7.

Enclosed is pertinent information. Please carefully review this information to avoid any misfortune which may disqualify your team from competition.

All team coaches must check-in at tournament headquarters located at Chippewa Middle School at-least 30 minutes prior to their first scheduled contest. At this time any outstanding materials shall be turned in. Teams without a properly completed roster will not be permitted to play. Players without proper documentation will be withheld from competition until they provide all necessary paperwork. Once the official roster has been submitted and a team's first game has begun, no players may be added. Teams found to have ineligible players will be immediately disqualified from competition.

Teams are asked to support the tournament host by purchasing their food and beverages at the concessions stand(s). Food and drink may not be brought into the complex (except water). Inform your fans that a daily admission will be charged for the tournament. Players in uniform and coaches possessing a pass will be allowed free entrance to the tournament.

The Host Representative: Larry Beck
The Tournament Manager: Larry Beck
The Supervisor of Officials: Dave Maher



If any pre-tournament questions arise please contact: Steve Ketter at (763)263-9993 x12 or steve@msf1.org.

As a guest of the host community, it is asked that your team conduct itself in a responsible manner during their entire stay in the host city. Your observance of any special rules that the host has established will assure the tournament's success. As you know, without willing hosts we would have no competition for sports enthusiasts in the state of Minnesota. With your assistance, we can all be assured that our sports program will continue to grow and benefit thousands of participants each year.

Should inclement weather or a power outage occur, contact the tournament headquarters/director to ascertain any schedule changes.

In closing, it is the MSF's desire that your team performs to the best of their ability and enjoys the opportunity to participate.

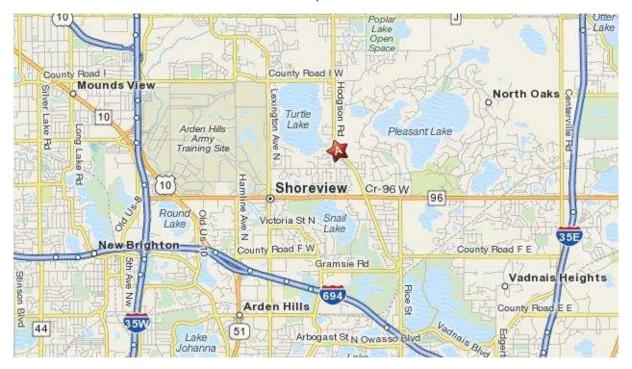
Sincerely,

Minnesota Sports Federation

PO Box 368 • Big Lake, Minnesota 55309 (763) 263-9993 + FAX(763) 263-5657 + www.msf1.org

CHIPPEWA MIDDLE SCHOOL

5000 Hodgson Rd North Oaks, MN 55126



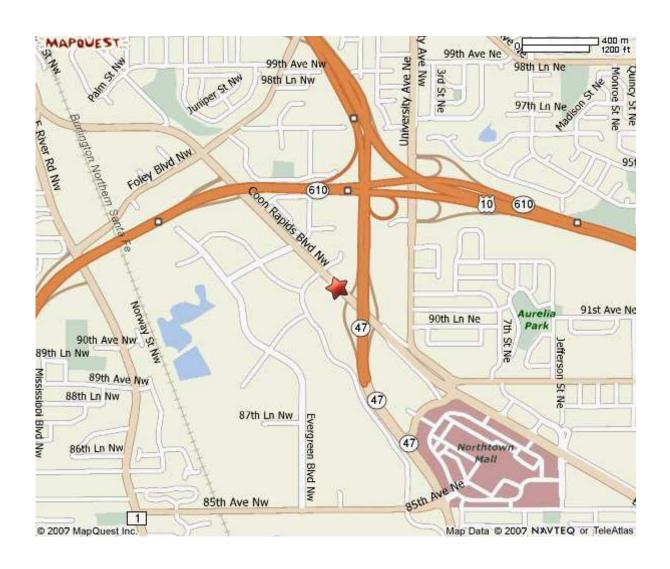
IRONDALE HIGH SCHOOL

2425 Long Lake Road New Brighton, MN 55112



Country Suites By Carlson Coon Rapids

155 Coon Rapids Blvd, Coon Rapids, MN 55433





2010 MSF YOUTH BASKETBALL PLAYER WAIVER, RELEASE OF LIABILITY, **INDEMNIFICATION AGREEMENT AND OFFICIAL TEAM ROSTER**



(To Be Entered All Must Be Filled Out)

Team Name:				Grade: 5	5th 6th 7th	8th 9th	Gender:	Boys	Girls	
Division Designation: A	ВС	Designate Ability: Above Average		Average E	Below Average	Email:_				
Team Coach:			Ph	Phone H (\ ∀			
Address:			City:_			State:	Zip:			
PLAYER STATEMENT: Each player shall read the following statement before signing the roster. I am a member in good standing of the above team and I am eligible under local sports community and MSF eligibility rules to compete with this team in local sports community and MSF of the above team and I am eligible under local sports community and MSF play. I understand that my signature may appear on only one tournament roster in the same age division. I agree to abide by the rules and regulations established for local and MSF play.	ad the following statement k ny signature may appear o	pefore signing the roster. I am a meming only one tournament roster in the sa	oer in good standing of the at me age division. I agree to a	oove team and I am ebide by the rules and	ligible under local sports. I regulations established f	community and MSF or local and MSF play	eligibility rules to compe	te with this team	in local sports co	ommunity
HOLD HARMLESS WAIVER OF LIABILITY: I, the undersigned player, acknowledge, agree and understand that: 1. Voluntarily and of my own free will, I elect to participate as a member of the basketball team indicated above. 2. I understand that there are certain risks an hazards involved in participating in basketball that may result in injury or death to me or other players, including, but not limited to those hazards associated with playing conditions, equipment and other participants. 3. I understand that the very nature of the game of basketball is nazardous and risky, including, but not limited to, the acts of running, Jumping, stretching, diving, and collisions with other players and with stationary objects, all of which can cause sectious injury or death to me and to other players. Further, I, the undersigned by the lagree that in consideration for the right to play as a member of the team designated above and in consideration for permission to play on the courts arranged for by the team: 1. I voluntarity elect to accept and assume all risks of any, and all of the courts arranged for by the teams of the players on my team, and (c) while on or upon the premises of any, and all of the courts arranged for by the teams or by both players on my team, and (c) while on or upon the premises of any, and all of the courts arranged for by the teams or by both players on my team, and (c) while on or upon the premises of any, and all of the courts arranged for by the teams or by both players on my team, and (c) while on or upon the premises of any, and all of the courts arranged for by	I, the undersigned player, that may result in injury or limited to, the acts of runni y as a member of the team no designated, (b) while so	acknowledge, agree and understand death to me or other players, includin rig, jumping, stretching, diving, and to designated above and in consideratic string in a non-playing capacity, as a	that. 1. Voluntarily and of m g, but not limited to those ha: collisions with other players a n for permission to play on the team member during practice	y own free will, I electory own free will, I electory ards associated with stationary objusted to courts arranged for or play by other tears.	It to participate as a meming playing conditions, equilects, all of which can caurby the team: 1. I volunt ms or by both players on r	per of the basketball to pment and other partic se serious injury or de arily elect to accept ar ny team, and (c) while	am indicated above. 2 ipants. 3. I understand ath to me and to other rand assume all risks of in on or upon the premise	I understand the that the very nate that the very nate of the that the very nate of the that the the that the the that the that the the the the the the the the the th	hat there are cert ature of the game I, the undersign suffered by me (a of the courts arra	ain risks an of basket- ed player,) while inged for by
entity connected with the team, Minnesoria Sports Federation for any breach of contract or wrongful conduct of the parties hereby released	orts Federation for any cial parties hereby released.	m, damages, costs or cause or action	which I have or may in the ri	uture nave as a resui	t of injuries or damages su	ustained or incurred by	y me from whatever cau	se including but	not limited to the	negligence
Print or Type Player's Name	Player's Signature	e Parent's or Legal Guardian's Signature	Residence Address	ress	City	Zip	School	Grade in School	Birth date M D Y	Uniform Number
1.										
2.										
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Statement of Team Ceach:	I boroby vorify th	Coops: I become verify that each player appearing on this MOE to improve treater and	2 On this MOE to	mont root		the elimibility	if in a program of the program and of the MOI program and of the modern	2 th > 1/10 E	200	<u>:</u>

from future MSF participation. understand that a violation of MSF eligibility rules will result in automatic disqualification of the team and may result in probation and/or suspension of our sports community statement of learn coach: I hereby verify that each player appearing on this MSF tournament roster qualifies under the eighbility rules outlined in the MSF program guide. I

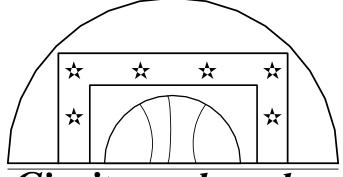
Team Coach's Signature

IMPORTANT: After completing this roster, make several copies for your files.

- * TEAM COACH CHECKLIST FOR TOURNAMENT PLAY *
- Signatures of all players and parents/guardians must be on this official tournament parents appearing on this official tournament poster shall be prepared to prove their
- Players appearing on this official tournament roster shall be prepared to prove their eligibility upon request of an MSF tournament representative.
- * Age/grade verification requirements can be found in current Youth Basketball Guidebook

All of the above requirements must be met at team check-in and throughout tournament play







Give it your best shot

2009-2010 Team History Form

(Please fill out and bring to seeding meeting. If not attending meeting fax to 763-263-5657 prior to seeding meeting.)

Team Name:	Coach:	
Phone:		
Gender: Girls Boys	Grade: 5th 6th 7th 8th 9th	
2009 Class: AA A BB B	B C 2008 Class: AA A BB B C	
2010 Record vs Competition: AA	A B C Overall Record:	
2009-2010 Tournaments and place finished		
#1 Class	of Competition:Place Finished:	
	of Competition:Place Finished:	
#3 Class	of Competition:Place Finished:	
#4 Class	of Competition:Place Finished:	
#5 Class	of Competition:Place Finished:	
2009 Championship Review		
Did you participate in the 2009 MSF State Championships? yes or no		
Do you have four of more of the same players from 2009 team? yes or no		
MSF 2009 State Championship Finish: Grade:Class:Place Finished:		