

2022 SLINGER HOOPS CLASSIC



WHEN:	Saturday, December 17, 2022			
WHO:	5th, 6th, 7th and 8th Grade Boys (B/C Level Tournament)			
WHERE:	All games will be played at the Slinger High School campus located at 209 Polk Street, Slinger, WI.			
ENTRY FEE:	\$180 Per Team			
	Entry deadline: December 3, 2022 or up to the first six (6) paid teams in each grade.			
FORMAT:	All teams wil play three games			
AWARDS:	Awards for 1 st and 2nd place			
WIAA rules will be followed with the following modifications:				
RULES:	 Two 18-minute halves. If teams are tied at the end of regulation play, the first team to score 4 points in overtime will win. Three timeouts per game, one additional timeout in overtime. Full court press and zone defenses are allowed for 6th-8th Grades. 5th grade cannot play zone defense, but can press in the last 2 minutes of each half. No team can press when ahead by 15 points or more. WIAA referees will officiate each game. Coaches, players and fans are asked to show courtesy and demonstrate good sportsmanship throughout the tournament. Anyone unable to follow guidelines and display good sportsmanship will be asked to leave for the remainder of the tournament. 			
ELIGIBILITY:	Community/school based B/C level teams only. No All-Star or AAU teams allowed.			
ADMISSION:	Daily Admission: Adults \$5, Students/Seniors \$3			
CONCESSIONS:	Provided at the tournament. Please, no carry-in food or beverages.			
BASKETBALLS:	Please bring your own basketballs to the tournament. You are asked to keep in your ball bag until your game time. Your cooperation is greatly appreciated by all.			
QUESTIONS:	Contact Tournament Director Tony Dobson, (262) 623-7642 or TDobson@vi.slinger.wi.gov			

Complete tournament information including brackets, game times, directions to the schools, etc. will be distributed to each team as soon as all teams have been selected and brackets have been determined, typically 2 weeks prior to the tournament.





2023 SLINGER HOOPS CLASSIC (B/C Level) REGISTRATION AND TEAM ROSTER INFORMATION FORM



TEAM NAME:		GRADE: 5 th 6 th 7 th 8 th (Circle One)	
HEAD COACH:	EMAIL:	PHONE:	
ASST COACH:	ASST COACH:	ASST COACH:	_

UNIFORM #:

PLAYER NAME:

1	
<u>2.</u>	
3	
<u>4.</u>	
5	
6.	
7	
8.	
9.	
<u>10.</u>	
<u>11.</u>	
12.	

Waiver: I (we) agree to hold harmless the Slinger School District and Slinger HOOPS, LTD for any injuries which may occur due to participation in the above named tournament.

Head Coach signature: _____

Date: ____

Please return your registration forms promptly. Teams will be accepted based on receipt of registration AND full payment.

Return completed form and check to:

Slinger HOOPS c/o Tony Dobson 300 Slinger Road Slinger, WI 53086