

BUZZARDS GLORY SLAM-N-JAM

15th Annual 2 on 2 Basketball

Saturday, August 1, 2009

Coldwater, Ohio

Coldwater Community Picnic

Guaranteed 3 Games

Game Day Registration and Check In: 10:00 - 11:00 A.M.
Games Start At 11:30 A.M.

New For 2009!
All Age Groups Start At
11:30 A.M.

Location: Memorial Park Tennis Courts

Pre-Registration: \$8.00 with no shirt, \$16.00 includes shirt
Pre-registration must be received by July 25

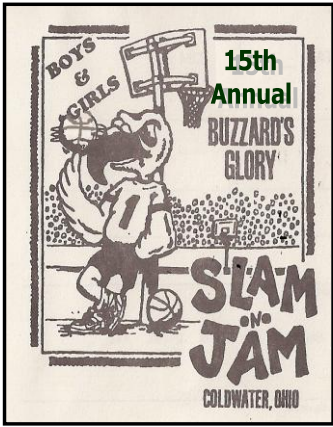
Game Day Registration: \$9.00 with no shirt, \$18.00 includes shirt (while they last)

Rain Date: Saturday, August 8

Age Groups:

Division 1B	Boys Ages 10-11
Division 2B	Boys Ages 12-13
Division 3G	Girls Ages 10-11
Division 4G	Girls Ages 12-13
Division 5B	Boys Ages 14-15
Division 6B	Boys Ages 16-17*
Division 7G	Girls Ages 14-15
Division 8G	Girls Ages 16-17*

**100% Of All Proceeds Go Toward
Improvements Of The Coldwater
Memorial Park & Public Library**



Age as of tournament date

* Or 18 years old and will be a senior in high school during 2009-2010 school year

Awards: All winners to receive Athletic Apparel

- Rules Of Play:
1. Coin flip determines opening possession.
 2. Possession changes on scores.
 3. Jump balls called by monitors; ball to defense
 4. Top, sides, and bottom of backboard are in play; support structure out of bounds.
 5. Ball must be checked by an opposing player before being put into play.
 6. All fouls and violations will be played out of bounds, top of court.
 7. All out of bounds balls taken out at top of court.
 8. Ball must be taken back to top of court line on all change of possessions.
 9. Take back means one foot behind the line.

Mail Completed Form & Check To: Gary Diller
3612 Menchhofer Road OR Drop off at any Peoples Bank Branch
Coldwater, OH 45828



For More Information: Call Gary Diller @ 419-678-8303 or go to www.coldwaterpicnic.com

Detach and mail with check payable to "Coldwater Community Picnic Association"

Team Name: _____ (Maximum Two Words) Division: _____
Amount Enclosed: _____

By Signing My Name I Agree To This Waiver Agreement

1. I fully agree that I am physically fit and able to participate in the Buzzard's Glory Tournament.
2. I fully understand that there is risk of physical injury and am willing to accept that possibility.
3. I fully understand that any organizations involved in the planning, facilities and coordination of the tournament as well as any of its sponsors and any associated individuals, are not responsible for any loss, injury or death related to participation or attendance at the 2009 Buzzard's Glory Tournament.
4. I fully agree that it is my responsibility to understand and obey all rules and laws to ensure my safety.
5. I fully agree to know and abide by all OHSAA rules.

Player 1 (Captain): Name: _____ Age: _____ Ph # _____ Shirt Size: YL S M L XL XXL

Sex of Team Address: _____ City: _____ State: _____ Zip: _____
 M F

Player Signature: _____ Parent/Guardian Signature: _____

Player 2 : Name: _____ Age: _____ Ph # _____ Shirt Size: YL S M L XL XXL

Address: _____ City: _____ State: _____ Zip: _____

Player Signature: _____ Parent/Guardian Signature: _____