

47th Annual St. Kilian Basketball Tournament

 St. Kilian Athletic Committee
Affiliated with St. Kilian Catholic Church

LOCATION: St. Kilian Gym – 264 West State Street, Hartford, WI
DATES: February 11th – February 24 , 2019
TEAMS: Open to 5th, 6th, 7th, and 8th Grade Boys and Girls (*Depending on registrations*)
COST: \$140.00

Championship Saturday for 5th Boys and Girls – February 23rd , 2019
3rd Place & Consolation Games will be played on Sat February 23rd unless there are conflicts
Championship Sunday February 24th for 6th – 8th Grade Boys and Girls

*******Please let us know of any scheduling conflicts ahead of time via the entry form**

RULES:

- 1). WIAA rules shall apply with the following exceptions:
- 2). Entered teams and players must have played for their school team during the season.
- 3). School Teams Only - No club teams or select teams.
- 4). Games are to be played on time as scheduled.
- 5). 5th grade boys and girls – Man to Man Defense only – No Zone Defenses
- 6). All Man to Man, Zone, and Press Defenses are allowed at all other levels.
- 7). No Pressing except the last 2 minutes of the game for 5th grade boys; 5th and 6th grade girls level
- 8). No pressing after 15 point lead or 25 point deficit
- 9). Warm-up balls and First Aid Kits will be made available
- 10). TWO WIAA OFFICIALS WILL OFFICIATE AT ALL GAMES
- 11). Technical fouls:
Technical fouls will not be shot - automatic two points and possession of the ball for opposing team
Two technical fouls is an automatic ejection from the game – three technicals of any kind will result in automatic ejection from the tournament including participation as a spectator.

AWARDS:

- 1). First, second, third, and consolation team trophies will be awarded in each division.
- 2). Individual trophies will be awarded to the first place team in each division.
NOTE: Only 12 individual trophies will be awarded to each first place team.
- 3). Individual medals will be awarded to the Second Place, Third Place, and Consolation Winners in each division.

Mail Check Payable to [St. Kilian Athletic Committee](#)

Mailing Address: John Thomae, St. Kilian Athletic Committee, 1563 Oriole Drive., Hartford, WI 53027

Use the following link for registration: <https://www.tourneymachine.com/E51394>

If you have any questions, please contact John Thomae, Tournament director at (262) 613-3603 or jmthomae@hotmail.com

FACILITY USAGE/INDEMNITY AGREEMENT

PARISH: St. Kilian

FACILITY USER: (Your school/team here)

DATES OF FACILITY USAGE: 02/11/2019 thru 02/24/2019

TYPE OF FACILITY USAGE: 47th Annual St. Kilian Invitational Basketball Tournament

The above named FACILITY USER agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims arising from the negligence or fault of the above named FACILITY USER or any of its agents, family members, officers, volunteers, helpers, partners, organizational members or associates which arise out of the above identified FACILITY USAGE at the above named PARISH.

FACILITY USER agrees to provide a certificate of insurance to the PARISH which provides evidence of general liability coverage of not less than one million dollars (\$1,000,000) per occurrence. FACILITY USER also agrees to have the PARISH named as an "Additional Insured" on its general liability policy for the DATES OF FACILITY USAGE in relationship to the TYPE OF FACILITY USAGE for claims which arise out of FACILITY USER'S operations or are brought against the PARISH by FACILITY USERS' employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates. FACILITY USER also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

If and only if FACILITY USER fails to comply with the above (second) paragraph, then the above named FACILITY USER agrees to protect, defend, hold harmless and fully indemnify the above named PARISH for any claim or cause of action whatsoever arising out of or related to the usage which takes place during the above identified DATE(S) OF FACILITY USAGE that is brought against the PARISH by the above named FACILITY USER or its employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates, whether such claim arises from the alleged negligence of the PARISH, its employees or agents, or the negligence of the FACILITY USER.

SIGNED BY: _____

(Must be an official agent of FACILITY USER)

NAME AND TITLE: _____

DATE: _____

2019 ST. KILIAN BASKETBALL TOURNAMENT ENTRY FORM

NAME OF SCHOOL: _____

School Nickname: _____

School Colors: _____

Please check appropriate team:

5th Grade Boys

6th Grade Boys

7th Grade Boys

8th Grade Boys

5th Grade Girls

6th Grade Girls

7th Grade Girls

8th Grade Girls

Head Coach: _____

Phone: _____

Mailing Address: _____

Cell: _____

Coach's Email: _____

Assistant Coach: _____

Phone: _____

Athletic Director: _____

LIST ANY SCHEDULE CONFLICTS! _____

PLEASE TYPE OR PRINT ROSTER

Jersey Number	Player Name
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____

Preliminary rosters can be emailed to: jmthomae@hotmail.com

If you have any questions, please contact:

John Thomae
Tournament director

1563 Oriole Drive
Hartford, WI 53027
(262) 613-3603

Email: jmthomae@hotmail.com