

# 2nd Annual Champlain Valley Shootout



**Who:** High school girls' basketball teams in VT

**What:** A summer basketball kick-off tournament (5 game minimum)

**When:** June 25-26 (pool play on Day 1, bracket play on Day 2)  
9:00 am – 6:00 pm (dependent on total # of teams)

**Where:** Champlain Valley Union HS (Hinesburg, VT)

**Why:** To allow the athletes to play for fun with little or no adult interference. The format instills the "next play" mindset for both players and coaches. (See rules attached)

**Prizes:** T-shirts for all, Winners take home the Shootout trophy

**Cost:** \$250 per TEAM

Checks Payable to **CVU Basketball**, c/o Ute Otley, 369 CVU Rd,  
Hinesburg, VT 05461

## CHAMPLAIN VALLEY SHOOTOUT

### Rules:

1. Games will be two 15-minute halves, with a 1 minute halftime. The clock will only stop in the last minute of the game. If the spread is 15+ points, the clock will not stop at all.
2. In the first 29 minutes of the game, if a player is fouled in the act of shooting, that player's team receives 1 point and the ball out of bounds under. (If the player scores the basket when fouled, her team gets 2 points and the ball back.) If the player is fouled, but not in the act of shooting, the team receives the ball out of bounds near the site of the foul.
3. In the last minute of the game, all non-shooting fouls result in a 1-n-1, and all shooting fouls result in 2 shots.
4. The referee does not need to touch the ball after violations, fouls or when it goes out of bounds. The ref will simply make the call and point in the direction the ball is going (Think international rules).
5. Substitutions are made on the run. Coaches will "hockey sub" players in a way that does not result in an offensive advantage on the substitution – after a made basket or when the ball is out of bounds.
6. There are NO timeouts.
7. Overtime will be sudden death - foul rules will be extended from the last minute of regulation.
8. The referee has the right to sit an athlete if she violates sportsmanship norms or is being overly physical. If an athlete is removed, she must sit for a minimum of 1 minute.
9. There will be 5 minutes of warm up time between games.
10. There is no limit on roster size. If you will need more than 10 shirts, arrangements must be made with the organizer.

Champlain Valley Shootout 2022  
Registration Form

High School \_\_\_\_\_

School Colors \_\_\_\_\_

Coach Name \_\_\_\_\_

Coach Phone # \_\_\_\_\_

Coach Email \_\_\_\_\_

T-shirt Sizes (10) \_\_\_\_\_

Return this registration form with a \$100 deposit to hold your spot in the tournament.

Please make copies of the attached waiver and have each player fill one out. Waivers must be submitted before your first game on Saturday, along with your fee balance.

Champlain Valley Shootout Waiver

Player Name \_\_\_\_\_

Team \_\_\_\_\_

Parent Cell # \_\_\_\_\_

Medical restrictions/concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**WAIVER:** I give permission for my child to participate in the Champlain Valley Shootout at Champlain Valley Union H.S. Prior to my child's participation in the camp, I will inform the director of any health problems or restrictions that will affect my child's participation in the tournament. I understand that the possibility of injury is inherent in basketball. In consideration of your acceptance of my child's entry, I hereby, for myself, my child, and our heirs, executors, and administrators, waive and release any and all rights, claims and damages we may have against CVU, its coaches and volunteers, successors and assigns, for any and all injuries suffered by either of us at any activity sponsored by this group. In the event of an emergency, I give permission for the above-mentioned child to receive medical treatment and to be transported by ambulance if necessary. I have provided the Champlain Valley Shootout with medical information pertinent to my child's participation in any recreation program and by this release authorize the dissemination of that information for any medical care and treatment. I hereby certify that I am a person having legal responsibility for the child and that I am duly authorized to execute this release form.

Parent or Guardian Signature:

Date: \_\_\_\_\_