



TOURNAMENT ENTRY FORM

INSTRUCTIONS:

This form must be filled out by the USA Softball Commissioner (or his/her designee) before the team listed below is allowed to compete in any of the following tournaments (check type of event):

REGIONAL
 NATIONAL/TERRITORY/HOF QUALIFIER
 NATIONAL CHAMPIONSHIP FINALS

YOUTH TEAM:

<input type="checkbox"/> GIRLS	<input type="checkbox"/> FAST PITCH	<input type="checkbox"/> GOLD	<input type="checkbox"/> 8U
<input type="checkbox"/> BOYS	<input type="checkbox"/> SLOW PITCH	<input type="checkbox"/> CLASS A	<input type="checkbox"/> 10U
<input type="checkbox"/> ACE COACH	<input type="checkbox"/> COACH PITCH	<input type="checkbox"/> CLASS B	<input type="checkbox"/> 12U
<input type="checkbox"/> INSURANCE:	<input type="checkbox"/> MACHINE PITCH	<input type="checkbox"/> CLASS C	<input type="checkbox"/> 14U
<input type="checkbox"/> TEAM			<input type="checkbox"/> 16U
<input type="checkbox"/> INDIVIDUAL			<input type="checkbox"/> 18U

ADULT TEAM:

<input type="checkbox"/> MEN	<input type="checkbox"/> SLOW	<input type="checkbox"/> MAJOR	<input type="checkbox"/> 35-OVER
<input type="checkbox"/> WOMEN	<input type="checkbox"/> FAST	<input type="checkbox"/> CLASS A	<input type="checkbox"/> 40-OVER
<input type="checkbox"/> COED	<input type="checkbox"/> MOD. 9'	<input type="checkbox"/> CLASS B	<input type="checkbox"/> 45-OVER
	<input type="checkbox"/> MOD. 10'	<input type="checkbox"/> CLASS C	<input type="checkbox"/> 50-75-OVER
	<input type="checkbox"/> IND.	<input type="checkbox"/> CLASS D	
	<input type="checkbox"/> 16'	<input type="checkbox"/> OTHER:	<input type="text"/>

TEAM INFORMATION:

<input type="text"/>	<input type="text"/>
TEAM NAME	MANAGER
<input type="text"/>	<input type="text"/>
ADDRESS	CITY/STATE/ZIP CODE
<input type="text"/>	<input type="text"/>
PHONE NUMBER	EMAIL ADDRESS

The team listed above is currently registered and in good standing with its local USA Softball Association. This team has qualified to compete in the division and classification of play listed above:

<input type="text"/>	<input type="text"/>
USA SOFTBALL LOCAL ASSOCIATION TEAM IS REGISTERED WITH	COMMISSIONER SIGNATURE
	<input type="text"/>
	COMMISSIONER PHONE NUMBER
	DATE

This portion of the form shall only be used when the team listed above has qualified for a National Tournament or the National Championship Finals. This form is to be completed by either the tournament director of the qualifying tournament, or the local USA Softball Commissioner if the team has qualified via one of the following: 1) Registration Berth, 2) Returning Team or 3) Host Team.

The above team has qualified for a national Tournament or the National Championship Finals from: (please check one)

STATE/METRO
 REGIONAL
 NATIONAL/TERRITORY/HOF QUALIFIER
 REGISTRATION BERTH
 RETURNING
 HOST TEAM

The above team has qualified to compete in the:

<input type="text"/>	<input type="text"/>
NATIONAL TOURNAMENT OR CHAMPIONSHIP FINALS	SIGNATURE OF QUALIFYING TOURNAMENT DIRECTOR OR LOCAL USAS COMMISSIONER
	<input type="text"/>
	DATE

NOTE: Forward a copy of this form and the official USA Softball Championship Roster and affidavits to the National Tournament or National Championship Finals Tournament Director.