

# 2010 PRE-TRI COUNTY SOFTBALL TOURNAMENT

**RECREATION LEAGUE ALL STAR TEAMS ONLY**

**Age Groups 6U through 18U (Fast pitch for 10U and older)**

**DATE: Tues, June 8th – Sunday June 13th, 2009 (In case of inclement weather tournament may extend after Jun 13<sup>th</sup>)**

**LOCATION: George Pierce Park  
55 Buford Hwy  
Suwanee, GA 30024**

**COST: \$175.00 entry fee per team and \$175 team fees (No gate fee)**

For more information, contact Mickey Norris at 678-333-3760  
([comms@ngbsa.org](mailto:comms@ngbsa.org)) OR Mitchell Ginsberg at 678-773-3804 ([commvs@ngbsa.org](mailto:commvs@ngbsa.org))

**Please make check payable to NGBSA (North Gwinnett Baseball/ Softball Association)**

Deadline for submitting entry form is June 2nd, 2010.

Home Park \_\_\_\_\_ Age Group \_\_\_\_\_

Gold or Silver Bracket (6U thru 10U only) \_\_\_\_\_

\*see TriCounty Rules for eligiblity

Team Name \_\_\_\_\_

Manager's Name \_\_\_\_\_

Phone/Contact information

Hm: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

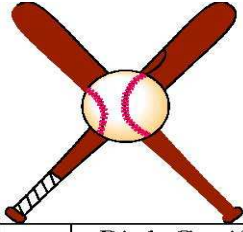
[E-mail](#) \_\_\_\_\_

Other team contact: \_\_\_\_\_

HM \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-mail \_\_\_\_\_

# 2010 Pre-TRI-COUNTY TOURNAMENT TEAM FORM



**AGE GROUP** \_\_\_\_\_

**PARK NAME** \_\_\_\_\_

	Birth Certificate Name	Address			D.O.B.	√
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
	Name	Home Phone	Work Phone	Cell	E-Mail	
Coach						
Assistant						
Assistant						
Assistant						

In the event of game delays due to rain or other circumstances where game schedules are subject to change, it is the responsibility of each team, to contact the tournament director or his appointed representative regarding game times. Duplicate copies of this form must be completed and signed by the head coach and each park's Softball Director and presented at the team certification meeting with funds made payable to NGBSA (North Gwinnett Baseball, Softball Association) the amount of \$350.00. This includes the \$175 entry fee and the \$175 team fee. Each park must also provide proof of insurance. One copy of the team form will be returned to you signed by the Tournament Director. The Tournament Director will retain the official copy. The tournament director prior to the start of the tournament will consider changes to the team roster, but no changes may be made after the tournament begins. In the event of player eligibility protest, you must have your copy of this form and copies of all birth certificates for each child. Failure to have a copy will constitute ineligibility. I hereby certify that all players are recreational league or C level players who have participated in our park's age group listed above during the regular season. I further certify that no player listed above has played more than three (3) tournaments and/or league games on a travel team. I further certify that no player has played in an age group older than what they are playing in all stars in more than 3 games. I understand that all games where an ineligible player has participated will be forfeited.

Park Softball Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Head Coaches Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Tournament Directors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

