

Tournament/Clinic Sanction Form Application

Name of Tournament/Clinic				-
Tournament/Clinic Site and Ad	dress of Park			-
Dates of Tournament/Clinic _		entry Deadline	-	
Entry/Participation Fee	Tournament For	mat & Number of Ga	mes Guaranteed	
Make Checks Payable to:				
Number of Teams/Players Exp	ected			
Division(s) of play: Girl's 8 & Under Fast Pitch	Girl's 10 & Under Fast Pitch		Girl's 12 & Under Fast Pitch	
Girl's 14 & Under Fast Pitch	Girl's 16 & Under Fast Pitch		Girl's 18 & Under Fast Pitch	
Men's 12" Slow Pitch	Women's Slow Pitch		Men's 16" Slow Pitch	
Co-Ed Slow Pitch				
Tournament Director/Event	Coordinator or S	<u>oonsor</u>		
Name		<u> </u>		
Address				
•		•	Work Phone ()	
Email Address				
 All teams participating All umpires working the Invitational Tournamer prohibited without the No invitational tournam Junior Olympic (Youth Junior Olympic (Youth Softball background ch A copy of the tournam No player or coach dis Failure to comply with suspend individuals re Sanctioned tournamen 	in the tournament will be tournament will be Lets may establish rules expressed written content may be conducted. The sale or posses in All adult coaches, seck, and at least one cht/clinic invitation flyes barred or suspended the above teams may sponsible for this everts will be listed on the	be USA Softball registereds and regulations for the State Community of the State Community	d. heir tournament. Joint ventures with competing orga	cation of play. d. t year USA Office. oster. Softball may ishes to use
Date Signature	of Event Director/Coo	rdinator		
previous year's state tourname tournaments, but may be purc USA Softball's General Liabilit	ent teams. Tournam nased from USA Sof y Insurance (\$5 milli	ent accident and lial tball of lowa (Bolling on) if all teams are i	he tournamentUSASoftball.com web site and embility insurance is not included with the sanctioninger Insurance). The tournament directors are coundividually registered. Tournament Directors maulal registration or by purchasing tournament/clin	ing of vered under sy require
	(7	This section for State (Commissioner)	
The Iowa ASA State Commission	ner Approves ()	Does Not Approve () the sanctioning of this tournament.	
Date Signatur	e of State Commissio	ner		
Please type in information in	this form and save	to your computer.	Either email form to: Tom Topping at	

Please type in information in this form and save to your computer. Either email form to: Tom Topping at tttopping@earthlink.net or fax to 641-236-6779 or mail to USA Softball of Iowa, 1534 Penrose St., Grinnell, IA 50112. For questions, please call 641-236-5766.