

TEAM REGISTRATION FORM | 2019 | USA TOURNAMENT

FALL FAST PITCH TOURNAMENT SERIES

INSTRUCTIONS: **All fields are required.** You must secure your team's place by first registering online at www.tournamentusasoftball.com, then complete this form and submit with entry fee by the registration deadline. Team spots are not guaranteed until payment is received in full. A completed USA Softball roster signed by parents must be emailed to the Tournament Director a minimum of two weeks before the tournament.

Team Name _____

City _____ State _____

Manager/Coach Name _____

Cell Phone _____ Day Phone _____ Evening Phone _____

Mailing Address _____

City _____ State _____ Zip _____

Email Address _____

Backup Contact _____ Phone _____

Email Address _____

Teams that sign up and pay for two or more tournaments in this series at the same time will receive a discount of \$25 per tournament.

Please indicate the tournaments and age class that you would like to participate in.

NW Fall Classic 14U (\$450) 16U/18U (\$450)

Fall Season Wrap-Up 14U (\$450) 16U/18U (\$450)

TOURNAMENT DATES AND ENTRY DEADLINES

NW Fall Classic September 14-15, 2019
Entries due August 26, 2019.

Fall Season Wrap-Up September 21-22, 2019
Entries due September 3, 2019.

TOURNAMENT LOCATION

Wallace Marine Park Softball Complex
200 Glen Creek Road NW, Salem, Oregon 97304

TOURNAMENT DIRECTOR

Maggie Combs
Office Phone 503-588-6261
Fax 503-588-6025
www.softballcityusa.com

REFUNDS

There will be no refunds after the registration deadline or after tournament slots have been filled, whichever comes first.

ACCEPTED TYPES OF PAYMENT



Visa, MasterCard, cash, or check (payable to City of Salem). Cash payments must be made in person. To arrange for online payments with a credit card, please email form register@softballcityusa.com to be set up.

SEND ENTRY FORM TO:

Attention: Softball
City of Salem Public Works Department
555 Liberty Street SE, RM 325
Salem, OR 97301-3513
register@softballcityusa.com



FOR OFFICE USE ONLY

<input type="checkbox"/> Cash _____	<input type="checkbox"/> Visa/MC	 	Cashier _____	Amount Paid _____
<input type="checkbox"/> Check # _____	_____		Date _____	Folder Number _____
_____	_____		Time _____	_____

