

USA SOFTBALL™

of CENTRAL CALIFORNIA

USACC Tournament Director Registration Form

Name (please print neatly): _____

Address: _____

City: _____, CA Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____

I PLAN TO CONDUCT: *(check all that apply)*

MFP WFP MSP WSP COED SENIOR

Check this box once you have attached your \$50.00 registration fee to this registration form (checks made out to CCASA) and signed below.

Please mail this form and payment to: USA Softball of Central Cal
PO Box 820
Paso Robles, CA 93447

All Tournament Directors MUST:

1. Use only USA registered Umpires.
2. Pay all sanctioning fees to cities and USACC.
3. Register all teams USA.
4. Submit your tournament request to USACC NO LATER THAN 30 days before the event.
5. After approval, you must purchase tournament insurance NO LATER THAN NOON 3 days prior to the event (this requires your final team count). View the Adult Tournament Packet on our website for more information.

By signing below I certify that I understand and agree to follow the above requirements.

Tournament Director Signature: _____

USACC Secretary: Jessica Ralls
Adult/Rec Commissioner: Bob McCormick

Office: 805-466-8505 **Fax:** 805-462-1026
Cell: 661-549-3987 **Fax:** 661-588-2254