



KANSAS AMATEUR SOFTBALL ASSOCIATION



TOURNAMENT ENTRY FORM

TOURNAMENT NAME

TOURNAMENT DATES

KASA STATE & NATIONAL QUALIFIER - WINFIELD

July 17, 2010

**My Team's Information:**

DIVISION OF PLAY	AGE GROUP	CLASS
Men's' Slow Pitch	None	D

TEAM NAME: \_\_\_\_\_

TEAM ACCOUNT #: \_\_\_\_\_

MANAGER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

Phone # Bus: \_\_\_\_\_ Res: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Local Commissioner: \_\_\_\_\_

Check #: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

\_\_\_\_\_  
Manager's Signature

\_\_\_\_\_  
Date

The above completed Entry Form and Entry Fee must be received at the address below on or before the published entry deadline. Do NOT mail your Championship Roster and Photo ID to the State Office or Tournament Director. You must hand-carry those documents to your Tournament Check-in.

Mail To: Men's Class D State & National Qualifier  
Winfield Recreation  
624 College  
Winfield KS 67156

Make checks payable to: Winfield Recreation