



10U / 12U / 14U

***A & B -State Tournament
2015***

**TOURNAMENT INFORMATION
PACKET**

Tournament Checklist

A coaches meeting will be held at the Gulfport Sportsplex, 17200 16th St, Gulfport, MS 39503-7936 at 4:00 PM on Friday afternoon. Play will begin at 6:00 PM. Each player will be required to sign-in. Players should arrive two hours prior to first game time to allow for checkin. The items below are required at check-in. Items should be neat and well organized to allow rapid review of each player's credentials.

Required Documentation:

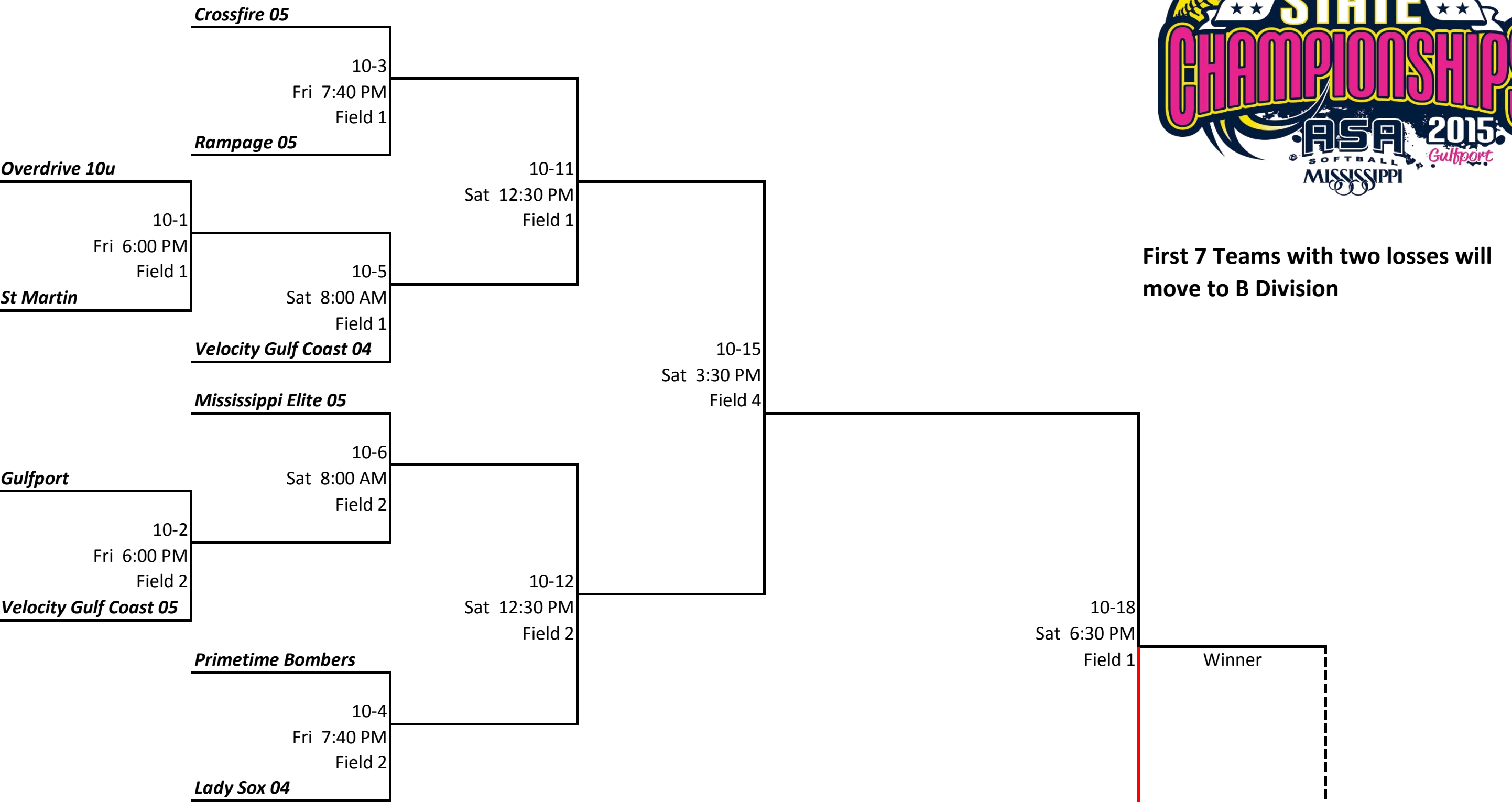
- ☐ ASA Championship Roster & Waiver Liability
- ☐ ASA Player Registration Cards
- ☐ Birth Certificate for Each Player
(copies are fine)
- ☐ Recent photo of Each Player
- ☐ ACE Coaches Certification Card

Mississippi ASA State Championships 2015

10 & Under

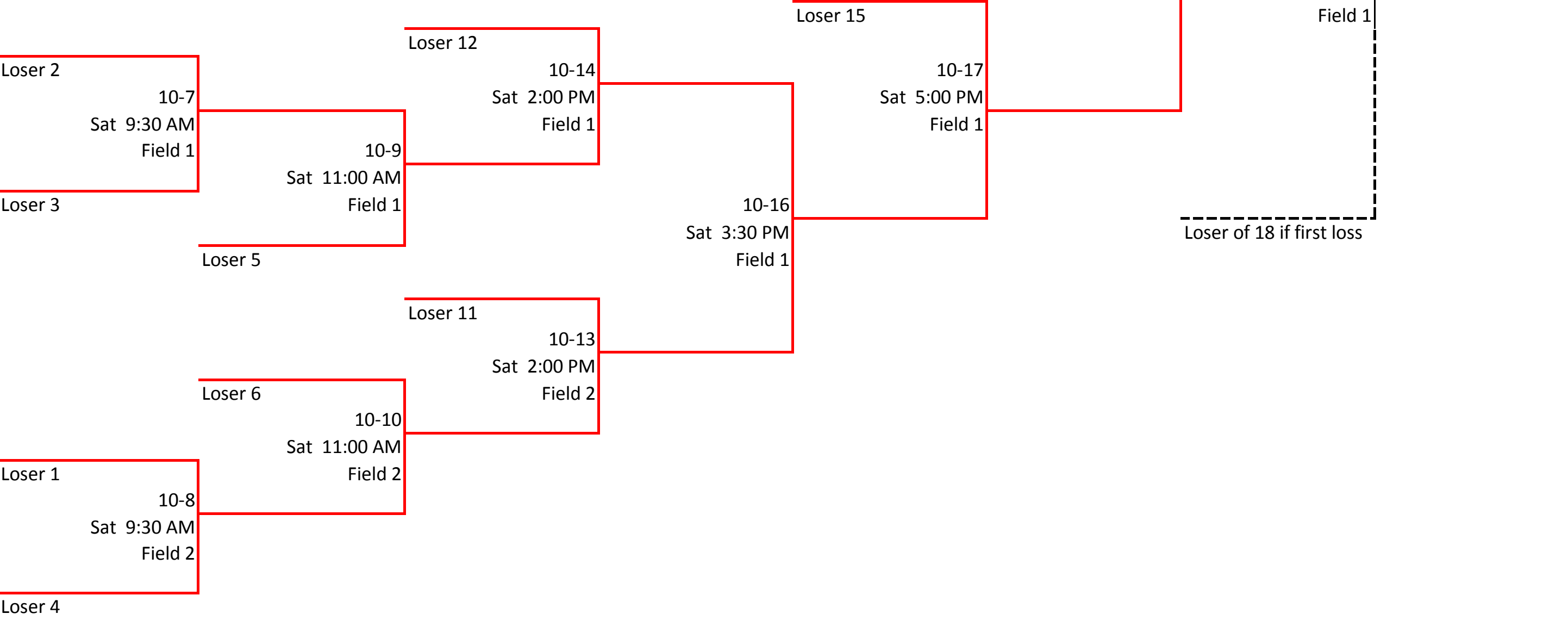
A Division:

Winner's Bracket

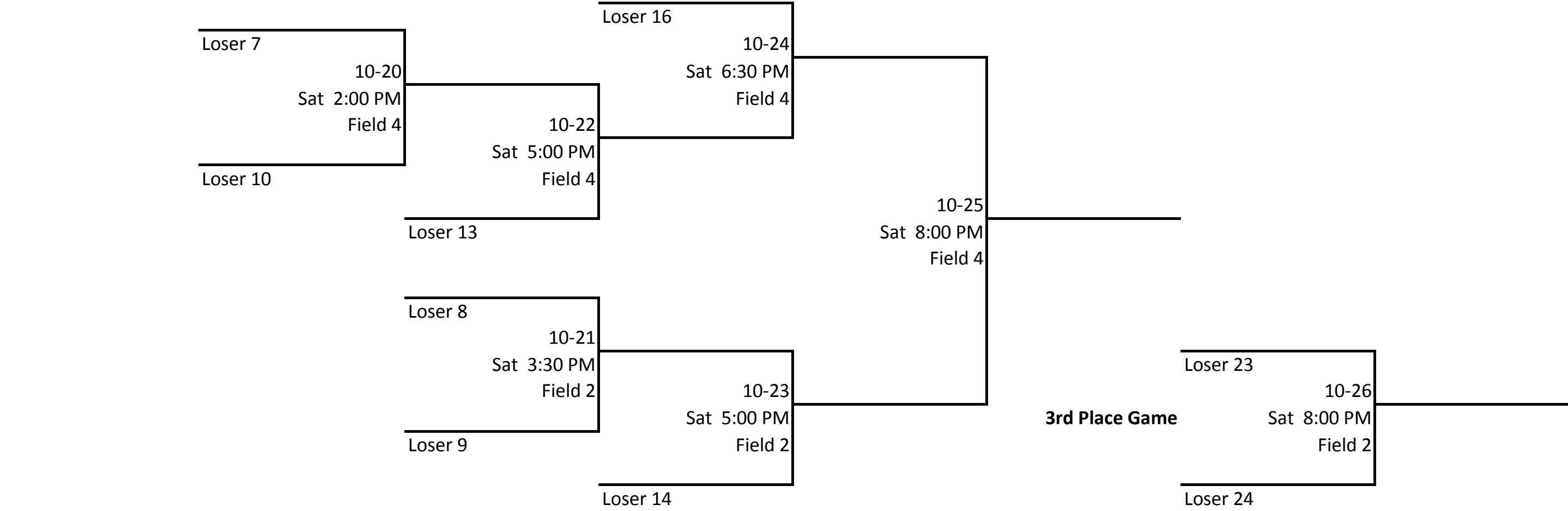


First 7 Teams with two losses will move to B Division

Loser's Bracket



B Division



Mississippi ASA State Championships 2015

12 & Under

Game	Time	Field	Team	Team
12P-1	Fri 6:00 PM	Field 3	Overdrive 02	Overdrive 03
12P-2	Fri 7:30 PM	Field 3	Ripstix	Gulf Coast Storm
12P-3	Sat 8:00 AM	Field 3	Overdrive 03	Gulf Coast Storm
12P-4	Sat 9:30 AM	Field 3	Overdrive 02	Ripstix

Winner's Bracket

Overdrive 02

12-1
Sat 11:00 AM
Field 3

Gulf Coast Storm

Ripstix

12-2
Sat 12:30 PM
Field 3

Overdrive 03

12-3
Sat 2:00 PM
Field 3

12-6
Sat 6:30 PM
Field 3

Loser's Bracket

Loser 3

12-5
Sat 5:00 PM
Field 3

Loser 1

12-4
Sat 3:30 PM
Field 3

Loser 2

12-7 (IF)
Sat 8:00 PM
Field 3

Winner

Loser of 6 if 1st loss



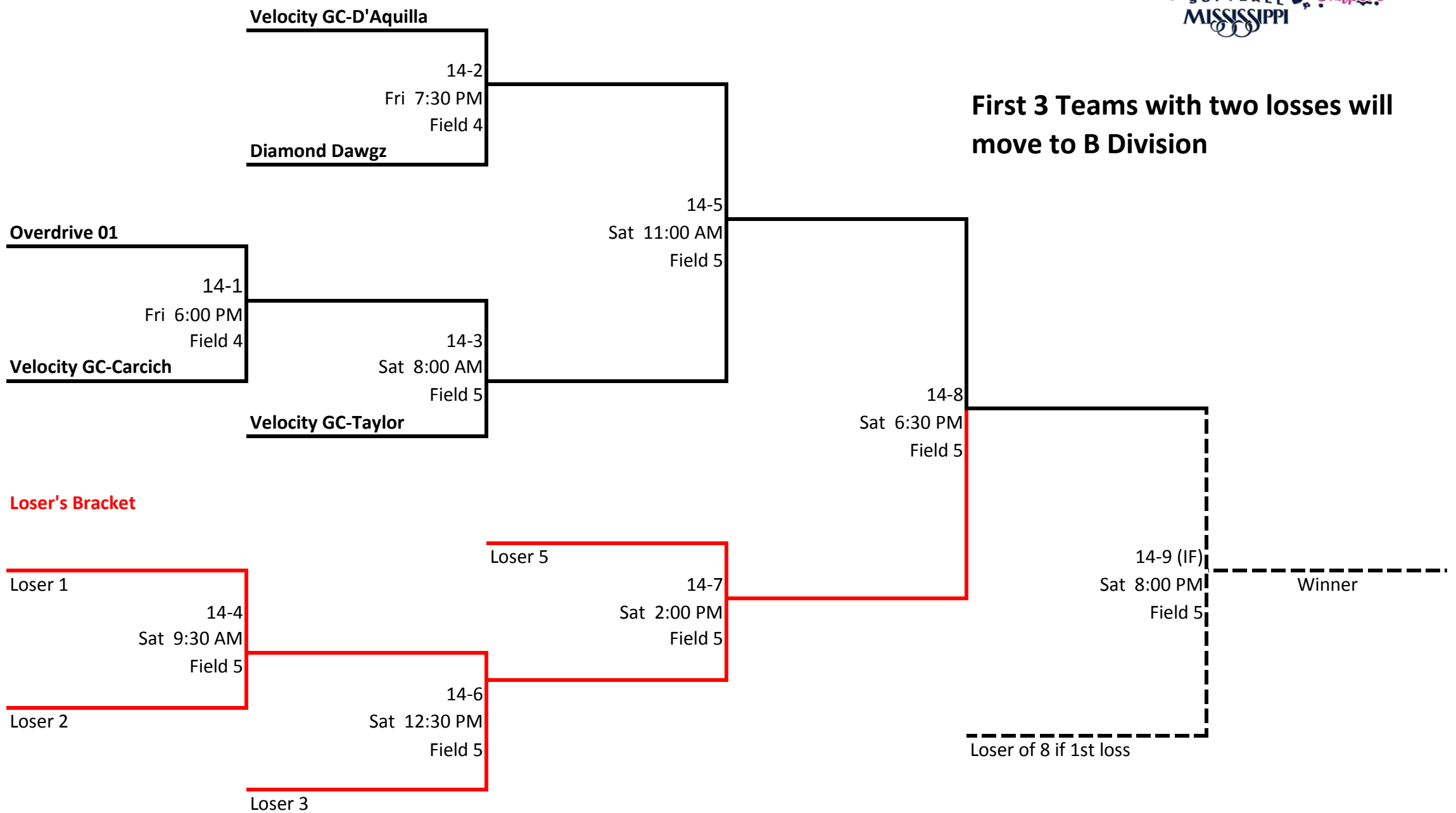
Mississippi ASA State Championships 2015

14 & Under

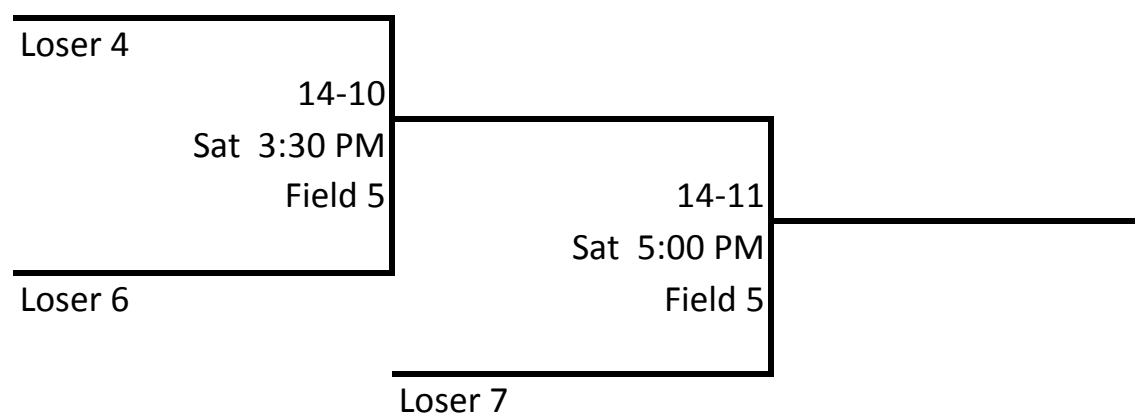


A Division

Winner's Bracket



B Division



Fast-Pitch

Tournament Rules

1. Game time limit of one hour and 20 minutes. Should we get ahead or behind scheduled game times due to weather or other reasons, be prepared to take the field for your games as time allows us to play them. It is the manager's responsibility to know when your games will be played.
2. A mandatory coaches meeting may begin at 9:00am on the Friday the tournament starts. Tournament games may begin play at 12:00 noon on the Friday the tournament starts.
3. Team manager will be responsible for their players at all times. The Team Manager is also responsible for their fans.
4. All protests will be handled by the tournament director and that decision will be final.
5. Managers must report to the press box 15 minutes prior to scheduled game time for the coin toss and to turn in their line-up.
6. Only rostered players, two coaches, one manager, one scorekeeper and one bat person will be allowed in the dug-out. All coaches must remain in the dug-out area throughout the game.
7. Game balls will be furnished by the tournament director.
8. A five inning 8 run rule, a four inning 12 run rule and a three inning 15 run rule will be used throughout the tournament.
9. Uniform rules apply as per current ASA Playing Rule Book, Rule 3 Section 6. A-G. However, NO JEWELRY WILL BE ALLOWED TO BE WORN.
10. Safety equipment rules will apply as per current ASA Playing Rule Book, Rule 3 Section 5. B and D (THIS RULE APPLIES TO JUNIOR OLYMPIC PLAYERS ONLY).
11. Pitching rules: as per the ASA Playing Rule Book.
12. 10-Under C- the batter is out on a dropped third strike and if the batter does run and draws a throw to first base, other runners cannot advance because of the throw.
13. No alcoholic beverages will be allowed inside the complex and no tobacco products allowed inside the playing area or dug-outs.
14. If your team qualifies, National Tournament Entry Fees for all Class "A" State Champion teams advancing on to ASA National Tournaments will be paid by the Mississippi ASA.
15. All teams that qualify to advance to the next tournament level must pay the tournament entry fee before leaving this Tournament. See your Tournament Director.

For more information:

E.T. Colvin

662-328-3180



ASA OFFICIAL WAIVER & RELEASE OF LIABILITY & INDEMNIFICATION FORM

20 _____ ASA OFFICIAL NATIONAL CHAMPIONSHIP ROSTER _____

Team Name _____

City & State _____

Division & Classification of Championship Play _____

1. Each player should read the statement on opposite side before completing and signing this roster. 2. Parents/Guardians signature should be on the same numbered line below as the player's name. 3. Players are subject to the ASA Drug Control Procedures and Policies as provided in the ASA Code. 4. By initialing in the column below, you acknowledge you have read & understand the liability waiver & player affidavit information on the reverse side. 5. **NOTE: Team accident insurance is not provided for ASA National Championship play. ASA has made available the voluntary purchase of team accident insurance. See your ASA commissioner for information.**

PRINT OR TYPE PLAYER'S NAME	DATE OF BIRTH	PLAYER or PARENT/GUARDIAN SIGNATURE	BONAFIDE RESIDENCE (Street, City, State, Zip)	INITIALS
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

TEAM MANAGER'S AFFIDAVIT- I am the manager of the above mentioned team & after receiving the ASA's Official Rules of Softball, & after being duly sworn, depose, & say that all the information supplied above is correct to the best of my knowledge & that all the players signed the above in their handwriting & they are eligible to compete with my team in the championship play of the ASA & agree to be bound by the rules of ASA as contained in the ASA Code & ASA's Official Rules of Softball.

Manager's Name (Print) _____
Manager's Signature _____
Manager's Address (Print) _____
City _____
State & Zip _____
Home Phone _____ Office _____
Cell Phone _____

ASA COMMISSIONER STATEMENT-

ALL OF THE INFORMATION ON THIS ROSTER IS CORRECT TO THE BEST OF MY KNOWLEDGE:

Signature of ASA Local Association Commissioner or Designee

ASA Local Association & Region Number

Date

Signature of ASA Deputy/District Commissioner

OFFICIAL CHAMPIONSHIP ROSTER



LIABILITY WAIVER

I, the signed player or the parent or legal guardian of a minor player named on this roster, acknowledge, agree and understand that: 1.) Voluntarily and of my own free will, I elect to participate as a member of the softball team and league indicated below. 2.) I understand that there are certain risks and hazards involved in participating in softball including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants in addition to the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I agree that in consideration for right to play as a member of the team designated below and in consideration for permission to play on the field arranged for by the team or league: 1.) I voluntarily elect or accept and solely assume all risk of damages, injury, including death, incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member or observer during practice or play by other teams or by other players on my team, and (c) while on or upon the premise of any and all of the fields arranged for by my team or league for practice or play. 2.) I release, discharge and agree not to sue the team and/or league designated below or any owner or leasee of fields on which softball is played or practiced by my team or the ASA, or their owners, officers, umpires, agents, servants, associations, employees, or any person or entity connected with the team, league, field or the ASA for any claim, damages, cost or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including, but not limited to the negligence, breach of contract or wrongful conduct of these parties hereby released. I further agree that I shall hold harmless and fully indemnify the parties hereby released from any claims, damages, costs including attorney fees, and cause of action which may arise from any claim or cause of action made by me, through me or on my behalf even if the damages, injuries or death are caused in whole or in part by any of the parties or entities hereby released. I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

PLAYER AFFIDAVIT

EACH PLAYER SHOULD READ THE FOLLOWING STATEMENT BEFORE COMPLETING AND SIGNING INVERSE PAGE. I have received the ASA's Official Rules of Softball and I understand and agree to be bound by the rules of ASA. I am a member in good standing of this softball team and I am eligible to compete with this team in the championship play of the ASA. I understand that I may play on only one team within a division during the season in ASA championship play and this is the team which I have elected to play for this season. I understand and agree that ASA has the right to take permanent possession of a bat that has been determined to be altered. In consideration of my being permitted to compete, I hereby give permission to the ASA and its local associations to use in any and all publications that they may desire, all pictures taken of the undersigned in their publicizing the game of softball. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

PARENT/GUARDIAN AFFIDAVIT

IF PLAYER IS A MINOR, HIS OR HER PARENT OR LEGAL GUARDIAN MUST SIGN ROSTER ON INVERSE PAGE. NOTE: FOR JUNIOR OLYMPIC DIVISIONS, VERIFICATIONS OF BIRTH DATE FOR EACH PLAYER MUST BE ATTACHED (i.e., Birth Certificate, Baptismal Certificate or Hospital Certificate maybe used.) Legible photocopies will be accepted.

I HEREBY GIVE PERMISSION TO THE TEAM MANAGER, INDICATED ON INVERSE PAGE, TO OBTAIN MEDICAL TREATMENT FOR THE MINOR PLAYERS WHICH I AM EITHER PARENT OR LEGAL GUARDIAN, IN THE EVENT THAT I AM NOT AVAILABLE AND MEDICAL TREATMENT IS REQUIRED. On behalf of the minor player, I hereby incorporate by reference and agree to comply with the policies stated in the affidavit. I also hereby give permission to the ASA and its local associations to use in any and all publications that they may desire, all pictures taken of the minor player in their publicizing the game of softball. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

Gulfport Sportsplex

17200 16th St
Gulfport, MS 39503-7936

From the East or West on Interstate 10:

Take the Canal Road exit north, turn right onto 16th Street at the Love's Truck Stop. Follow 16th Street to the Sportsplex Entrance.

From the North on U.S. 49:

Take a right off highway 49 South on to Landon Road. (Landon road is the last stop light intersection before I-10, across from the Cross Roads Shopping Mall). Follow Landon Road approximately 1.5 miles to the Sportsplex North Entrance. Turn at the Sportsplex Entrance sign



MISSISSIPPI ASA
INCLEMENT WEATHER PROCEDURES

- 1 A game called by the umpire shall be regulation if five or more complete innings have been played, or if the team second at bat has scored more runs in four or more innings than the other team has scored in five or more innings. The umpire is empowered to call a game at any time because of darkness, rain, fire, panic or any other cause that places the players or patrons in peril.
- 2 Games that are not considered regulation shall be resumed at the exact point where they were stopped.
- 3 In the event the tournament cannot be completed within the scheduled time frame the following procedures shall be used to break ties among teams in the same spot in the bracket:
 - a) **Head to head competition**
 - b) **The team that advanced the farthest in the winner's bracket**
 - c) **Won-loss records, except among undefeated teams.**
 - d) **If only two teams are tied for a position and have played each other, the winner of that game.**

EXCEPTION: If there are only two teams remaining and each team has one loss, the championship must be played or the teams shall be declared co-champions.

 - e) **The teams shall be ranked according to the fewest runs allowed per game played**
 - f) **If a tie still exists, by a coin toss.**
 - g) **At any time during the tournament the sole discretion of the Tournament Director, abbreviated procedures may be initiated to allow the tournament to continue to completion.**
- 4 It is the responsibility of the manager/coach to confirm all scheduled game times with the Tournament Director. The official tournament bracket will be posted at the press box/concession stand. Game time is forfeit time.

TOURNAMENT DIRECTOR: TOM STANLEY

Please check <http://facebook.com/GulfCoastASA> for game updates.