



TOURNAMENT ENTRY FORM

Team Name _____

ACE Certified Coach _____

E-Mail _____

ACE Coach Address _____

City & Zip _____

ACE Phone (Day) _____ (Night) _____ (Fax) _____

Head Coach _____

E-Mail _____

Head Coach Address _____

City & Zip _____

Head Phone (Day) _____ (Night) _____ (Fax) _____

DIVISION & CLASSIFICATION

JUNIOR OLYMPIC SLOW-PITCH

(mark one)

- 8-Under Coach-Pitch (North)
- 8-Under Coach-Pitch (South)
- 10-Under
- 12-Under
- 14-Under
- 16-Under
- 18-Under

JUNIOR OLYMPIC FAST-PITCH

(mark age & circle North or South)

- 10-Under A
- 10-Under B
- 10-Under C (North) (South)
- 12-Under A
- 12-Under B
- 12-Under C (North) (South)
- 14-Under A
- 14-Under B
- 16-Under A
- 16-Under B
- 18-Under

ADULT SLOW-PITCH

(mark one)

- Men C
- Men D
- Men E
- Men Church
- Women

TOURNAMENT ENTRY FEES:

\$200.00 for All Coach-Pitch North / South STATES. \$250.00 for All Slow-Pitch & Coach-Pitch STATES. \$350.00 for A, B & C Class J.O. Fast-Pitch STATES.

THIS FORM MUST BE RETURNED TO YOUR LOCAL COMMISSIONER:

ENTRY FORM MUST BE RETURNED BY:

***JUNE 24 (J.O. FP) *JUNE 24 (Coach-Pitch) *TBD (J.O. SP) *August 5 (Adults SP States)**

DO NOT WRITE HERE

FOR OFFICIAL USE ONLY

Date Entry Form Received _____ Method of Payment _____ Received By _____

ENTRY FEE MUST BE ATTACHED TO THIS FORM!!!



2016

MISSISSIPPI ASA STATE TOURNAMENTS

JUNIOR OLYMPIC (Youth)

	Site	Date	Contact	Home Phone	Work Phone	Cell Phone
J.O. Girls COACH-PITCH						
8-Under Coach-Pitch North State	Columbus	July 1-2	Roger Short	662-251-4014		662-251-4014
8-Under Coach-Pitch South State	Wiggins	July 1-2	Tom Stanley			228-365-2301
8-Under Coach-Pitch Overall State	Ridgeland	July 15-16	Chris Chance	601-573-0604	601-853-2011	601-573-0604
J.O. Girls FAST-PITCH						
10-Under- A State	Gulfport	July 8-9	Tom Stanley			228-365-2301
10-Under- B State	Gulfport	July 8-9	Tom Stanley			228-365-2301
10-Under- C North State	Columbus	July 1-2	Roger Short	662-251-4014		662-251-4014
10-Under- C South State	Wiggins	July 1-2	Tom Stanley			228-365-2301
10-Under- C Overall State	Ridgeland	July 15-16	Chris Chance	601-573-0604	601-853-2011	601-573-0604
12-Under- A State	Gulfport	July 8-9	Tom Stanley			228-365-2301
12-Under- B State	Gulfport	July 8-9	Tom Stanley			228-365-2301
12-Under- C North State	Kosciusko	July 1-2	Kay Patrick	662-289-7073	662-289-2120	601-416-1023
12-Under- C South State	Wiggins	July 1-2	Tom Stanley			228-365-2301
12-Under- C Overall State	Ridgeland	July 15-16	Chris Chance	601-573-0604	601-853-2011	601-573-0604
14-Under- A State	Ridgeland	July 1-3	Chris Chance	601-573-0604	601-853-2011	601-573-0604
14-Under- B State	Ridgeland	July 1-3	Chris Chance	601-573-0604	601-853-2011	601-573-0604
16-Under- A State	Ridgeland	July 1-3	Chris Chance	601-573-0604	601-853-2011	601-573-0604
16-Under- B State	Ridgeland	July 1-3	Chris Chance	601-573-0604	601-853-2011	601-573-0604
18-Under State	Ridgeland	July 1-3	Chris Chance	601-573-0604	601-853-2011	601-573-0604

J.O. FAST-PITCH NATIONAL QUALIFIERS

10-Under A	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181
12-Under A	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181
18-Under A	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181
14-Under A (for SW Region 6 Teams only)	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181
16-Under A (for SW Region 6 Teams only)	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181
18-Under A (for SW Region 6 Teams only)	Columbus	June 10-12	E.T. Colvin	662-328-3180		662-242-3181



(OFFICIAL ROSTER) 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.

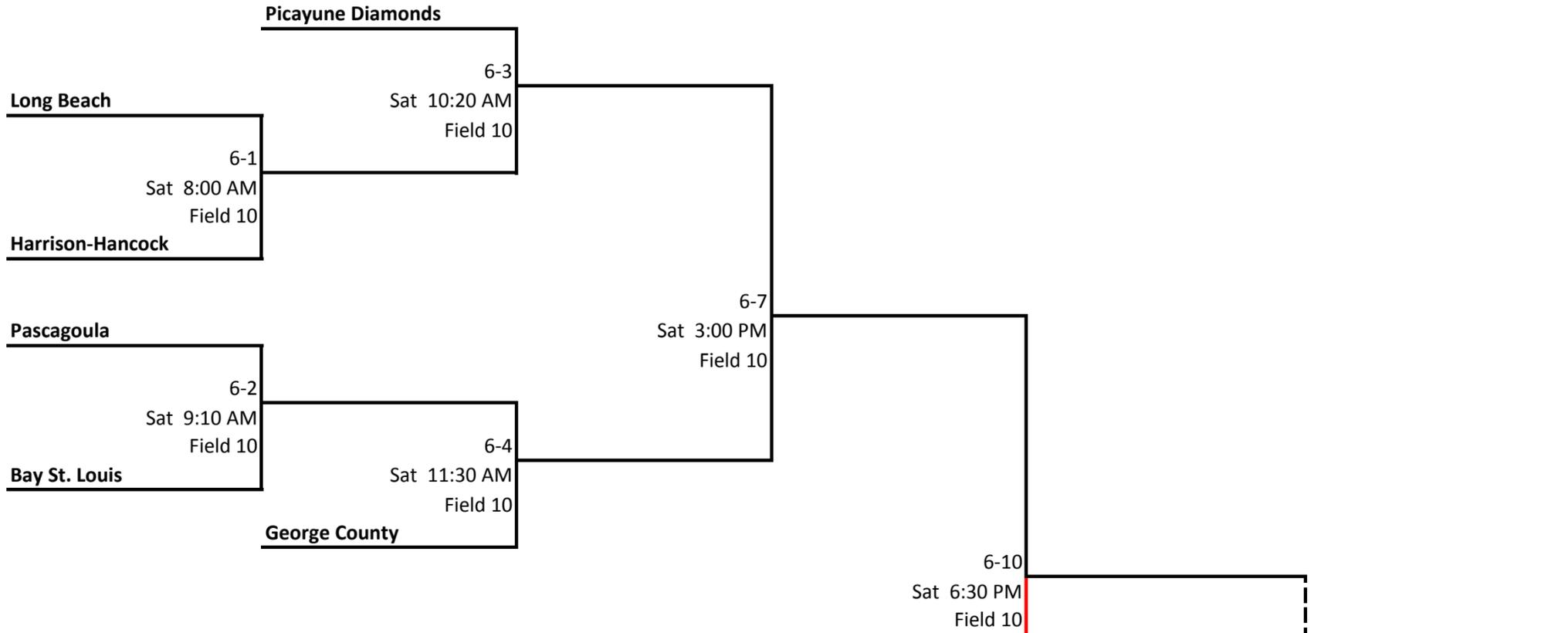
I HEREBY GIVE PERMISSION TO THE TEAM MANAGER, INDICATED ON INVERSE PAGE, TO OBTAIN MEDICAL TREATMENT FOR THE MINOR PLAYERS WHICH I AM EITHER PARENT OR LEGAL GUARDIAN, IN THE EVENT THAT I AM NOT AVAILABLE AND MEDICAL TREATMENT IS REQUIRED. On behalf of the minor player, I hereby incorporate by reference 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.

Gulf Coast Championships 2016

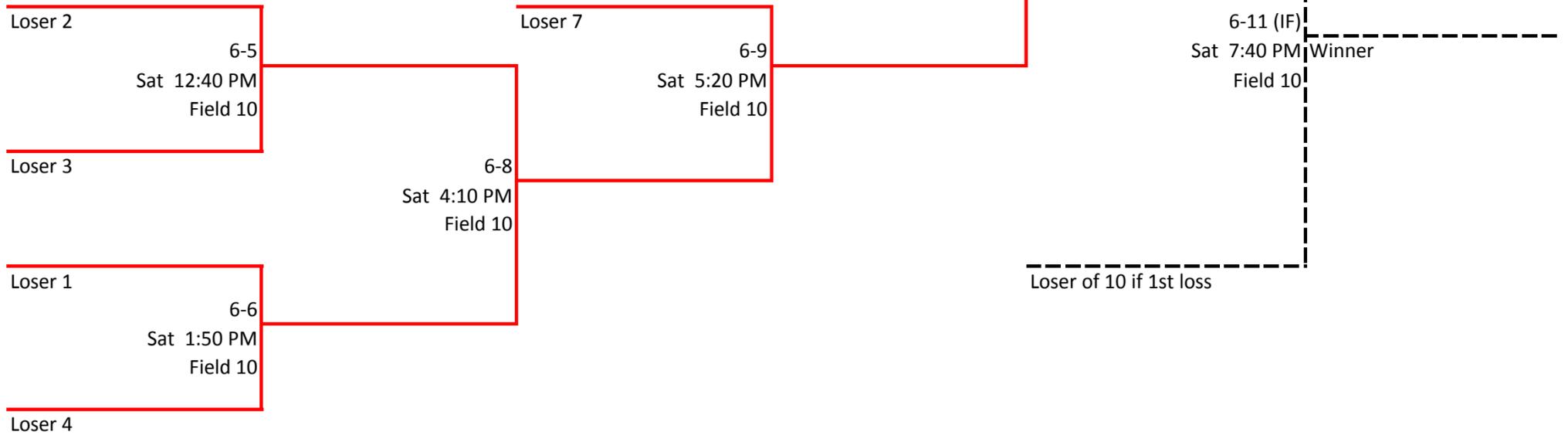
Tee Ball



Winner's Bracket



Loser's Bracket

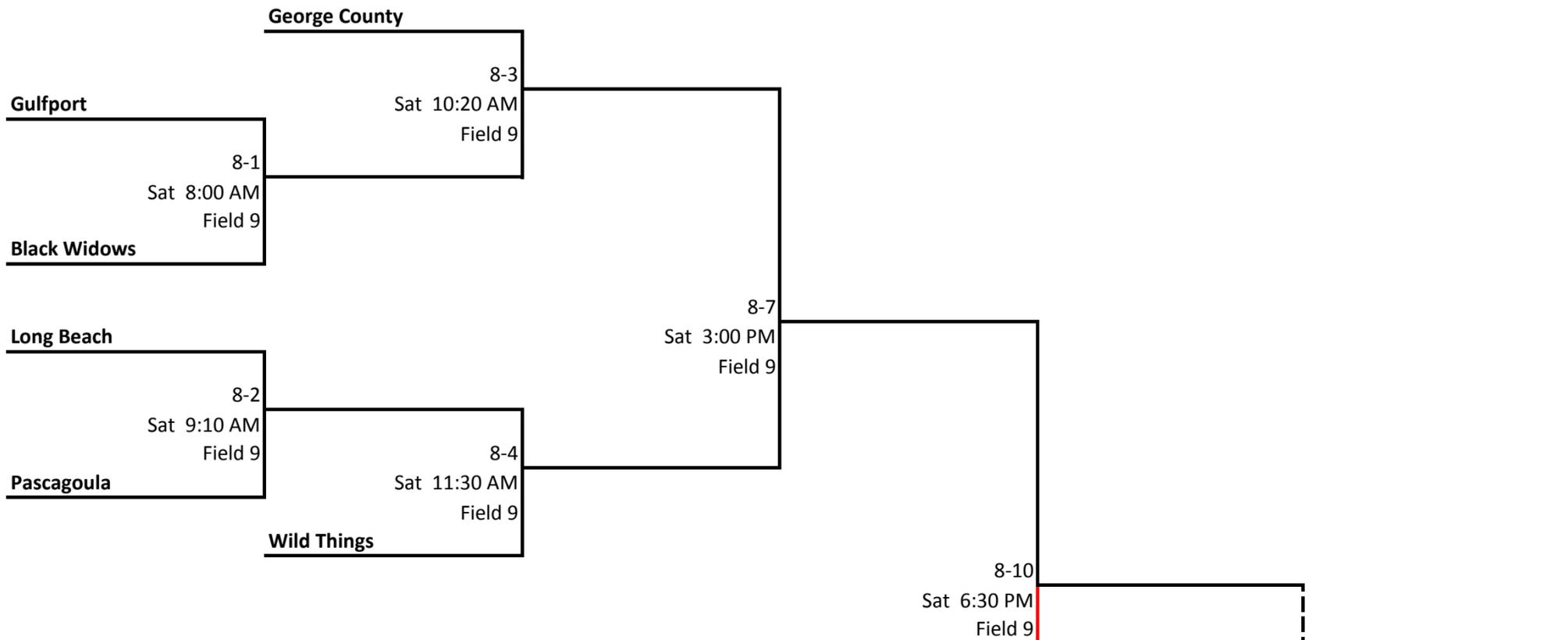


Gulf Coast Championships 2016

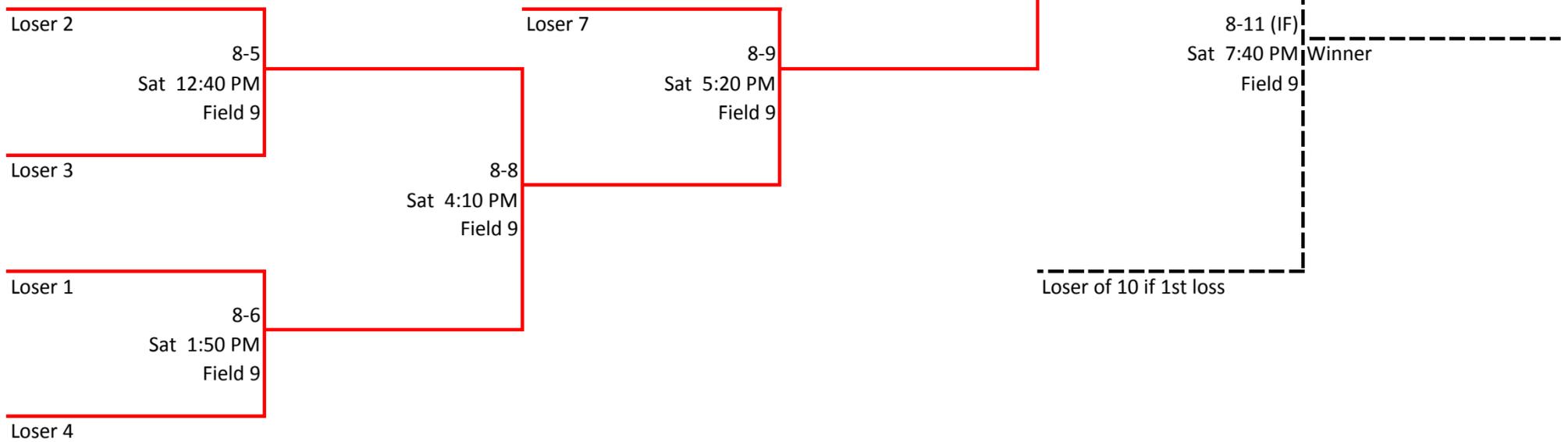
Coach Pitch



Winner's Bracket



Loser's Bracket



Gulf Coast Championships 2016

10 & Under All-Star

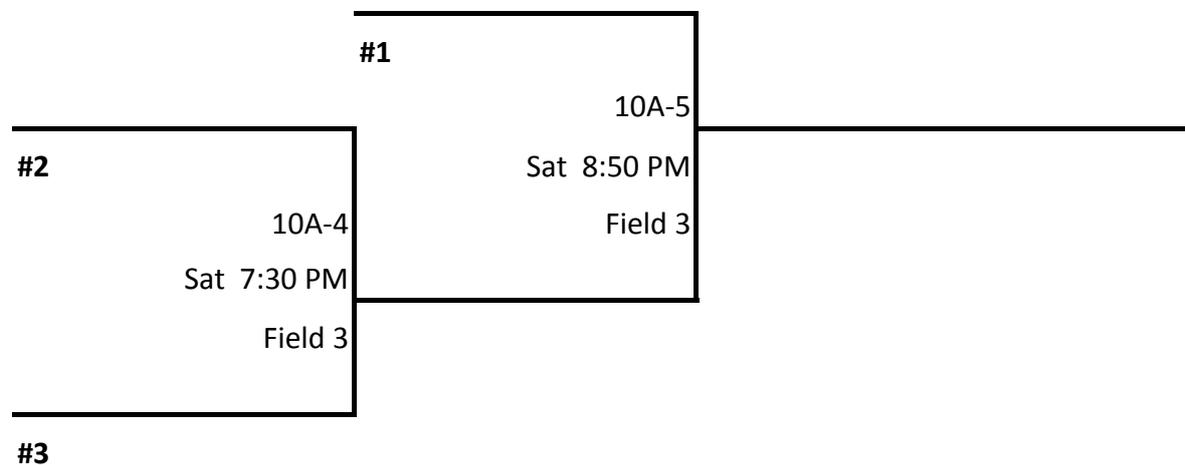
FORMAT: TWO POOL TO SINGLE ELIMINATION

Game	Time	Team 1	Team 2	Field
10A-1	Sat 2:20 PM	GC Wild Things	Pascagoula	Field 3
10A-2	Sat 3:40 PM	Picayune Hot Shots	Pascagoula	Field 3
10A-3	Sat 5:00 PM	Picayune Hot Shots	GC Wild Things	Field 3

Pool games Count -- No new after 1:10 minutes -- Finish the inning.

Seeding Priority

1. Win Loss Record
2. Head to Head -
Only for 2 way ties
3. Runs Allowed
4. Runs Scored
5. Coin Flip



Gulf Coast Championships 2016

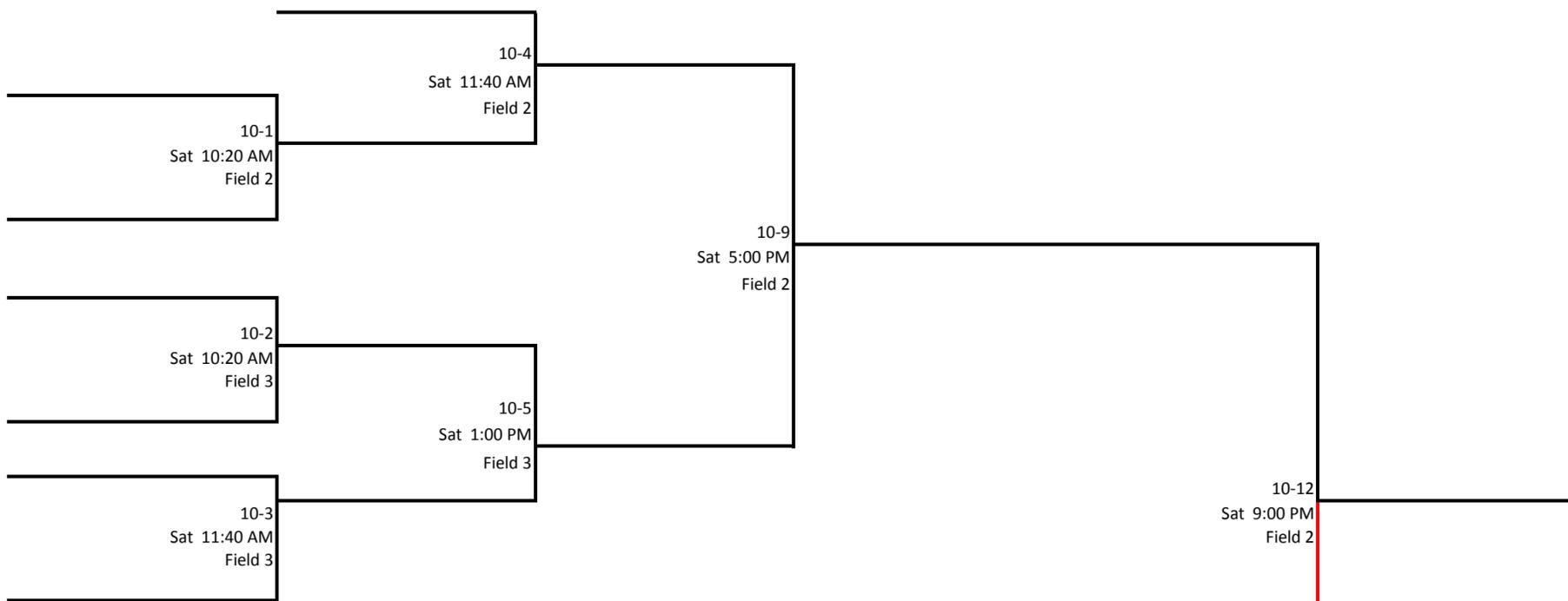
10 & Under Open



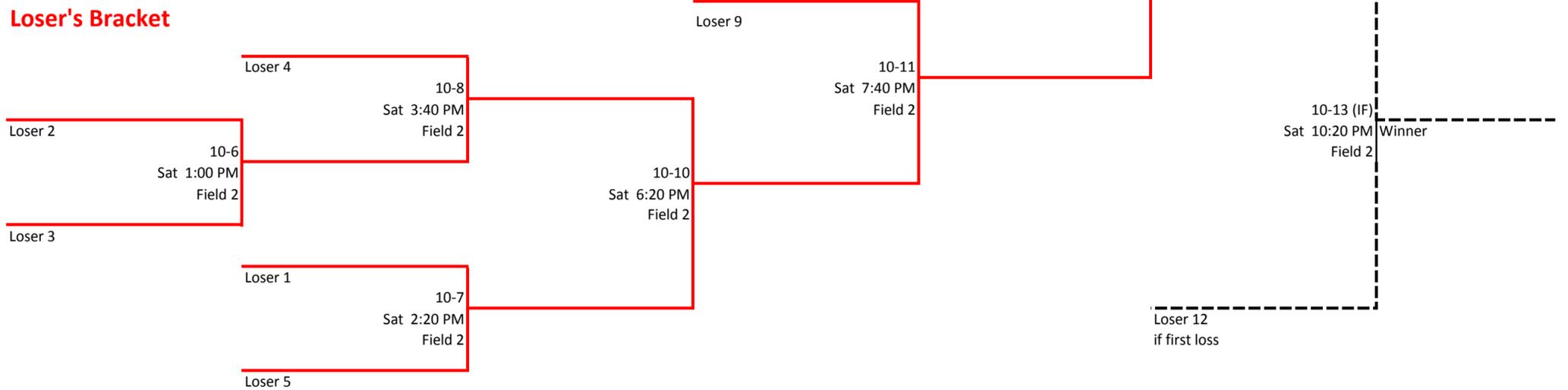
Pool Schedule

Game	Time	Team 1	Team 2	Field
10-1P	Sat 8:00 AM	Velocity Gulf Coast Woodward	Gulf Coast Extreme	Field 2
10-2P	Sat 8:00 AM	Velocity Gulf Coast Seal	Mississippi Force	Field 3
10-3P	Sat 9:10 AM	Jones Country Legacy	Mississippi Force	Field 2
10-4P	Sat 9:10 AM	Southern Storm	Crossfire	Field 3

Winner's Bracket



Loser's Bracket



Gulf Coast Championships 2016

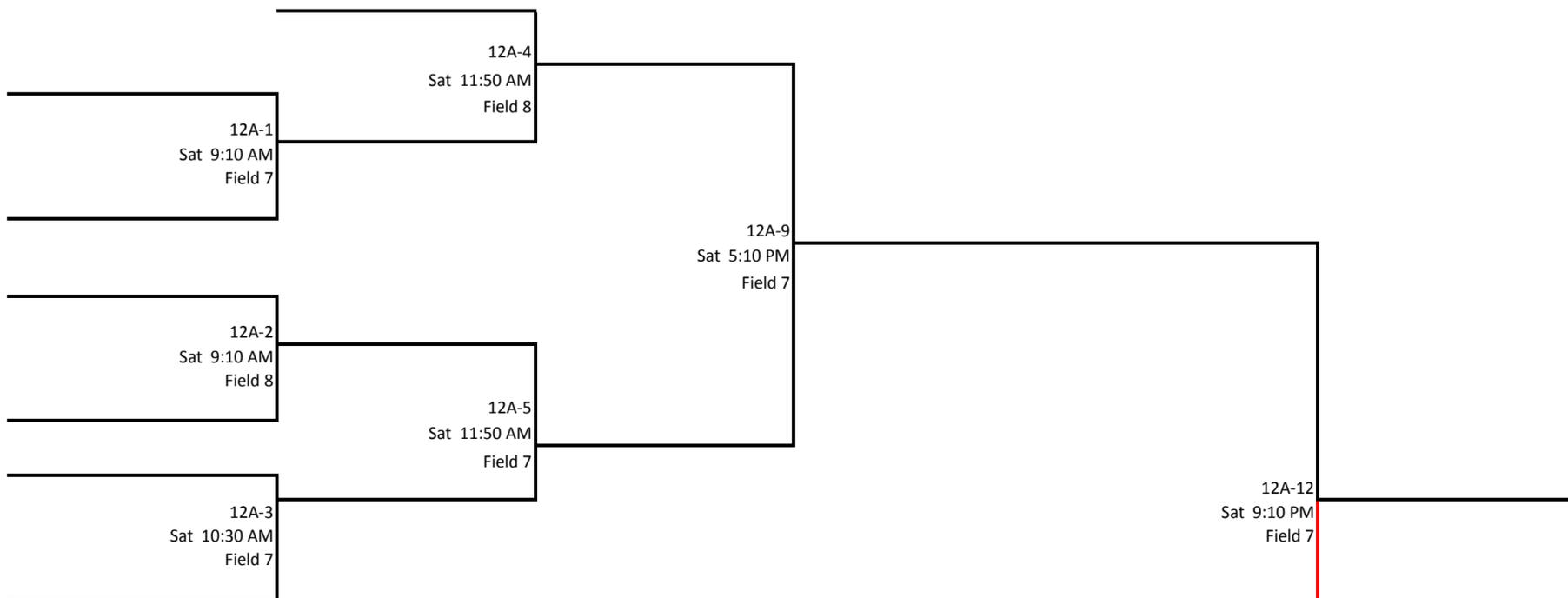
12 & Under All-Star



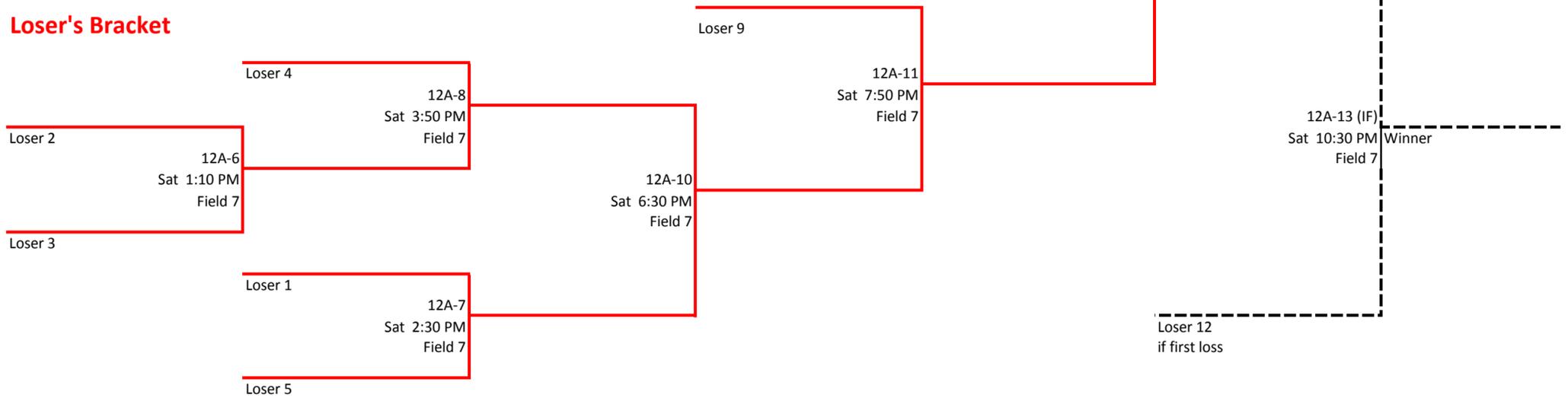
Pool Schedule

Game	Time	Team 1	Team 2	Field
12A-1P	Fri 6:30 PM	Biloxi Reds	Gulfport	Field 1
12A-2P	Fri 7:40 PM	Pascagoula	Bay St. Louis	Field 1
12A-3P	Sat 8:00 AM	Long Beach	Poplarville Aftershock All Stars	Field 7
12A-4P	Sat 8:00 AM	Biloxi Reds	Oak Grove	Field 8

Winner's Bracket



Loser's Bracket



Gulf Coast Championships 2016

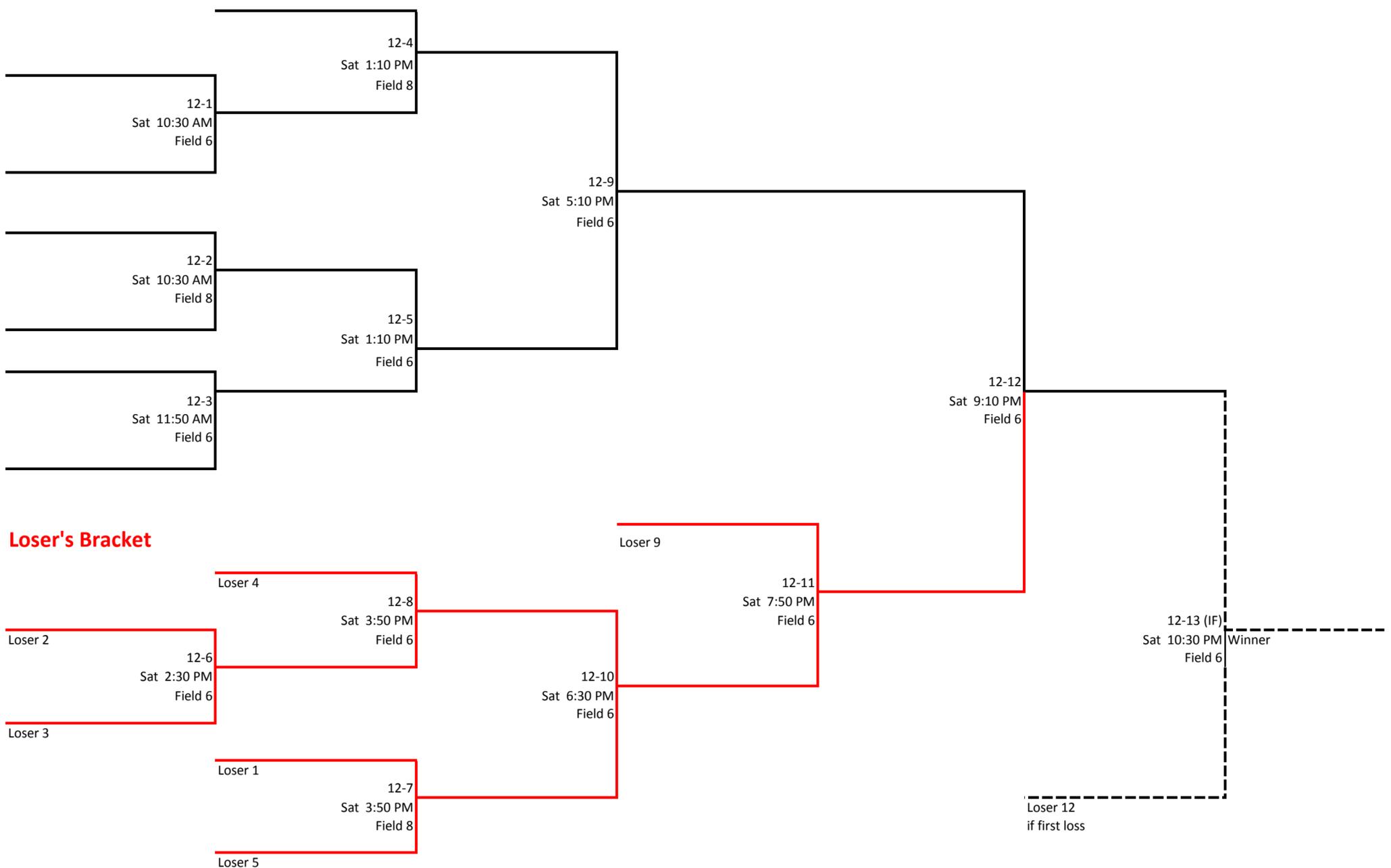
12 & Under Open



Pool Schedule

Game	Time	Team 1	Team 2	Field
12-1P	Fri 6:30 PM	Overdrive 03	Battitude	Field 3
12-2P	Fri 7:40 PM	Overdrive 03	Gulf Coast Extreme	Field 3
12-3P	Sat 8:00 AM	Overdrive 04	Gulf Coast Angels	Field 6
12-4P	Sat 9:10 AM	Lady LegendZ	OG Aftershock	Field 6

Winner's Bracket



Gulf Coast Championships 2016

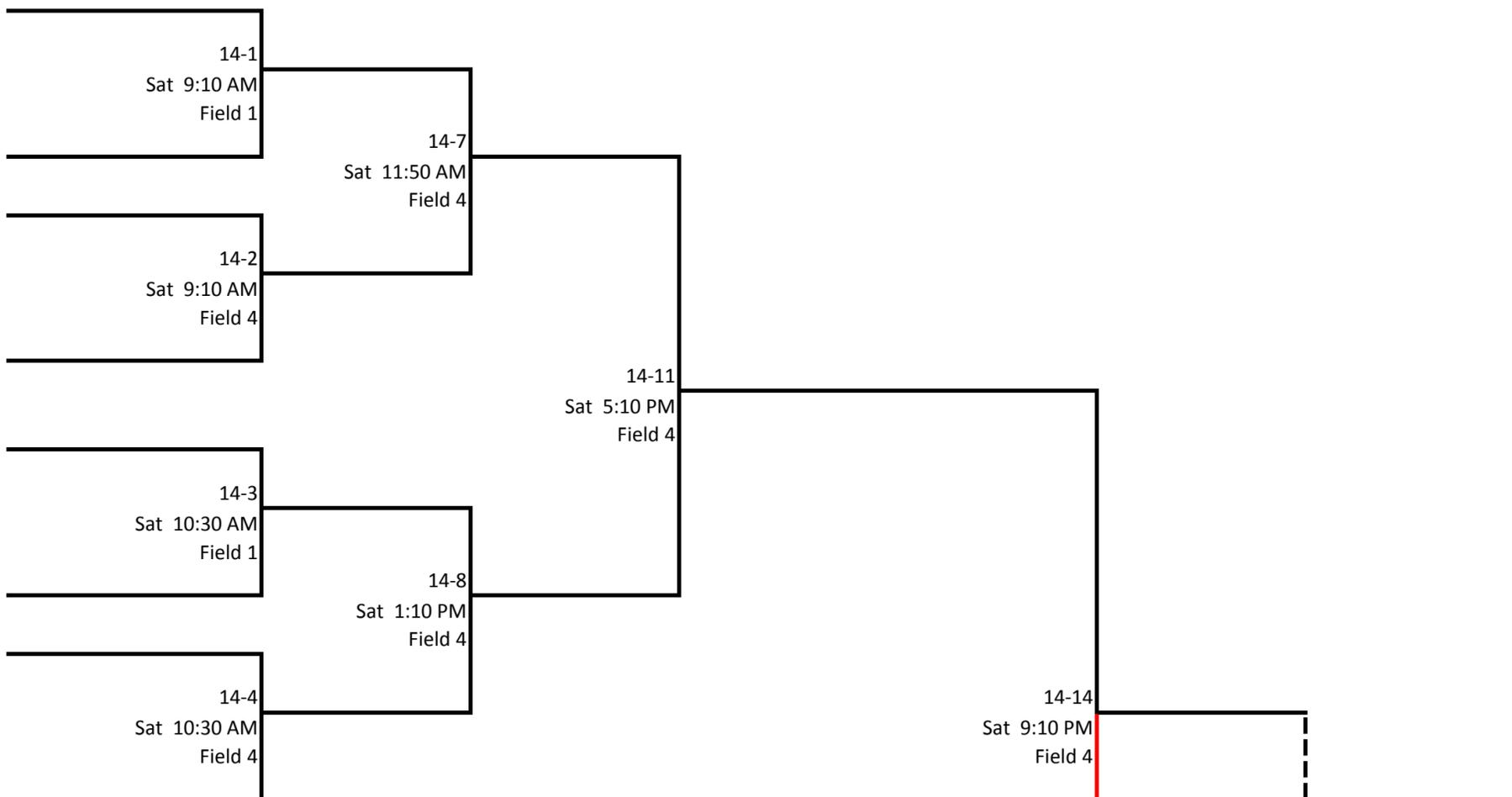
14 & Under



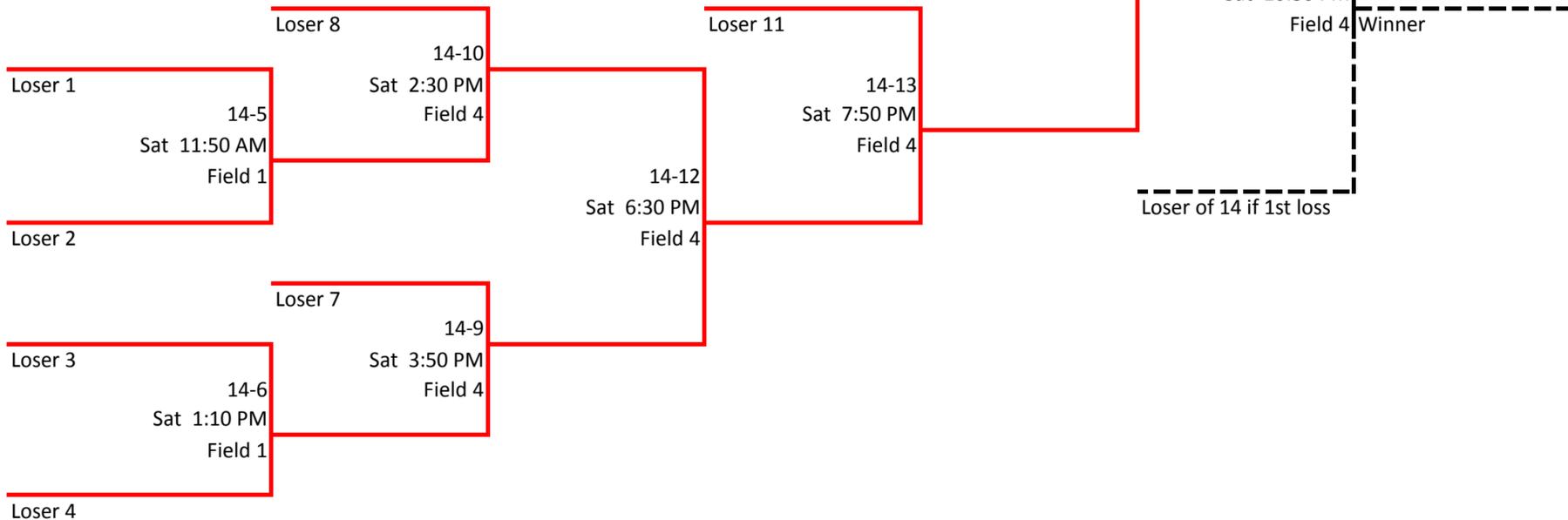
Pool Schedule

Game	Time	Team 1	Team 2	Field
14-1P	Fri 6:30 PM	Gulfport Shock	Velocity Gulf Coast-Elsworth	Field 4
14-2P	Fri 7:40 PM	Gulf Coast Extreme	Gulf Coast Thunder	Field 4
14-3P	Sat 8:00 AM	Overdrive 02	Ripstix	Field 1
14-4P	Sat 8:00 AM	Gulf Coast Vipers	Overdrive 01	Field 4

Winner's Bracket



Loser's Bracket



Gulf Coast Championships 2016

Field 1			Field 2			Field 3			Field 4		
Day	Time	Umpires	Day	Time	Umpires	Day	Time	Umpires	Day	Time	Umpires
Fri	6:30 PM	12A-1P	Fri	6:30 PM		Fri	6:30 PM	12-1P	Fri	6:30 PM	14-1P
Fri	7:40 PM	12A-2P	Fri	7:40 PM		Fri	7:40 PM	12-2P	Fri	7:40 PM	14-2P
Fri	8:50 PM		Fri	8:50 PM		Fri	8:50 PM		Fri	8:50 PM	
Sat	8:00 AM	14-3P	Sat	8:00 AM	10-1P	Sat	8:00 AM	10-2P	Sat	8:00 AM	14-4P
Sat	9:10 AM	14-1	Sat	9:10 AM	10-3P	Sat	9:10 AM	10-4P	Sat	9:10 AM	14-2
Sat	10:30 AM	14-3	Sat	10:20 AM	10-1	Sat	10:20 AM	10-2	Sat	10:30 AM	14-4
Sat	11:50 AM	14-5	Sat	11:40 AM	10-4	Sat	11:40 AM	10-3	Sat	11:50 AM	14-7
Sat	1:10 PM	14-6	Sat	1:00 PM	10-6	Sat	1:00 PM	10-5	Sat	1:10 PM	14-8
Sat	2:30 PM		Sat	2:20 PM	10-7	Sat	2:20 PM	10A-1	Sat	2:30 PM	14-10
Sat	3:40 PM		Sat	3:40 PM	10-8	Sat	3:40 PM	10A-2	Sat	3:50 PM	14-9
Sat	4:50 PM		Sat	5:00 PM	10-9	Sat	5:00 PM	10A-3	Sat	5:10 PM	14-11
Sat	6:00 PM		Sat	6:20 PM	10-10	Sat	6:20 PM		Sat	6:30 PM	14-12
Sat	7:10 PM		Sat	7:40 PM	10-11	Sat	7:30 PM	10A-4	Sat	7:50 PM	14-13
Sat	8:20 PM		Sat	9:00 PM	10-12	Sat	8:50 PM	10A-5	Sat	9:10 PM	14-14
Sat	9:30 PM		Sat	10:20 PM	10-13 (IF)	Sat	10:10 PM		Sat	10:30 PM	14-15 (IF)
Sat	10:40 PM		Sat	11:40 PM		Sat	11:20 PM		Sat	11:50 PM	
Sat	11:50 PM		Sat	12:50 AM		Sat	12:30 AM		Sat	1:00 AM	
Sat	1:00 AM		Sat	2:00 AM		Sat	1:40 AM		Sat	2:10 AM	

Gulf Coast Championships 2016

Field 6			Field 7			Field 8			Field 9			Field 10		
Day	Time	Umpires	Day	Time	Umpires	Day	Time	Umpires	Day	Time	Umpires	Day	Time	Umpires
Fri	6:30 PM		Fri	6:30 PM		Fri	6:30 PM		Fri	6:30 PM		Fri	6:30 PM	
Fri	7:40 PM		Fri	7:40 PM		Fri	7:40 PM		Fri	7:40 PM		Fri	7:40 PM	
Fri	8:50 PM		Fri	8:50 PM		Fri	8:50 PM		Fri	8:50 PM		Fri	8:50 PM	
Sat	8:00 AM	12-3P	Sat	8:00 AM	12A-3P	Sat	8:00 AM	12A-4P	Sat	8:00 AM	8-1	Sat	8:00 AM	6-1
Sat	9:10 AM	12-4Pb	Sat	9:10 AM	12A-1	Sat	9:10 AM	12A-2	Sat	9:10 AM	8-2	Sat	9:10 AM	6-2
Sat	10:30 AM	12-1	Sat	10:30 AM	12A-3	Sat	10:30 AM	12-2	Sat	10:20 AM	8-3	Sat	10:20 AM	6-3
Sat	11:50 AM	12-3	Sat	11:50 AM	12A-5	Sat	11:50 AM	12A-4	Sat	11:30 AM	8-4	Sat	11:30 AM	6-4
Sat	1:10 PM	12-5	Sat	1:10 PM	12A-6	Sat	1:10 PM	12-4	Sat	12:40 PM	8-5	Sat	12:40 PM	6-5
Sat	2:30 PM	12-6	Sat	2:30 PM	12A-7	Sat	2:30 PM	12A-8	Sat	1:50 PM	8-6	Sat	1:50 PM	6-6
Sat	3:50 PM	12-8	Sat	3:50 PM	12A-8	Sat	3:50 PM	12-7	Sat	3:00 PM	8-7	Sat	3:00 PM	6-7
Sat	5:10 PM	12-9	Sat	5:10 PM	12A-9	Sat	5:10 PM	12A-10	Sat	4:10 PM	8-8	Sat	4:10 PM	6-8
Sat	6:30 PM	12-10	Sat	6:30 PM	12A-10	Sat	6:30 PM		Sat	5:20 PM	8-9	Sat	5:20 PM	6-9
Sat	7:50 PM	12-11	Sat	7:50 PM	12A-11	Sat	7:40 PM		Sat	6:30 PM	8-10	Sat	6:30 PM	6-10
Sat	9:10 PM	12-12	Sat	9:10 PM	12A-12	Sat	8:50 PM		Sat	7:40 PM	8-11 (IF)	Sat	7:40 PM	6-11 (IF)
Sat	10:30 PM	12-13 (IF)	Sat	10:30 PM	12A-13 (IF)	Sat	10:00 PM		Sat	8:50 PM		Sat	8:50 PM	
Sat	11:50 PM		Sat	11:50 PM		Sat	11:10 PM		Sat	10:00 PM		Sat	10:00 PM	
Sat	1:00 AM		Sat	1:00 AM		Sat	12:20 AM		Sat	11:10 PM		Sat	11:10 PM	
Sat	2:10 AM		Sat	2:10 AM		Sat	1:30 AM		Sat	12:20 AM		Sat	12:20 AM	