

ASA of PA
Invitational Tournament Fact Sheet

TOURNAMENT NAME:	Lancaster PA 8 th Annual College Showcase
DATE:	June 4th and June 5th 2016 / Individual Skills Clinic – Friday, June 3rd – 5:00 pm Detailed Skills Clinic information will be available after January 15th at razorbacksoftball.com
LOCATION:	Lancaster, PA
ENTRY FEE:	\$495
AGE/CLASS	16&U A/B, 18&U A/B
ENTRY DEADLINE:	May 24, 2016 The tournament fee & entry form must be <u>in the hands of the tournament contact by deadline.</u>
ENTRY FORM:	Make checks payable to “ <u>PA SOFTBALL TOURNAMENTS</u> ” and mail to the tournament contact with your payment.
ELIGIBILITY:	ONLY ASA registered teams are eligible to participate. Teams must be ASA registered through REGISTERASA. To register with ASA go to www.paasa.org
FORMAT:	Four Game Format. Teams will be contacted via e-mail for bracket seeding game times. 3 preliminary games and a draw for Sunday single elimination bracket games.
SCHEDULES:	4 separate winners on Sunday: 16A & 16B plus 18A & 18B
RULES:	With the exception of a 1 ½ hour time limit being used for all games, ASA rules will be utilized throughout all Sunday elimination games.
HOTEL INFO	Details on Hotel Info to follow
FIELD DIRECTIONS:	https://www.garrettfIELDS.com also, field directions will be emailed
TOURNAMENT DIRECTOR:	Name: Dave Mergenthaler
TOURNAMENT CONTACT:	Contact: Jere Flick Address: 6120 Lemon Street, East Petersburg, PA 17520 Phone: (717) 940-1549 Email: jndrazorback@yahoo.com
REQUIRED DOCUMENTATION/ CERTIFICATION	Required at check-in: <input type="checkbox"/> Proof of ASA Registration <input type="checkbox"/> Proof of ASA Insurance
AWARDS	1 st and 2 nd place trophies and individual medals

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(TOURNEY NAME HERE)

Team Name _____

Age/Class (circle one) **16U** **18U** (circle one) **Class A** **Class B**

Managers Name _____

Address _____

City _____ **State** _____ **Zip** _____

Home phone # () - _____ **Cell Phone:** () - _____

Email _____